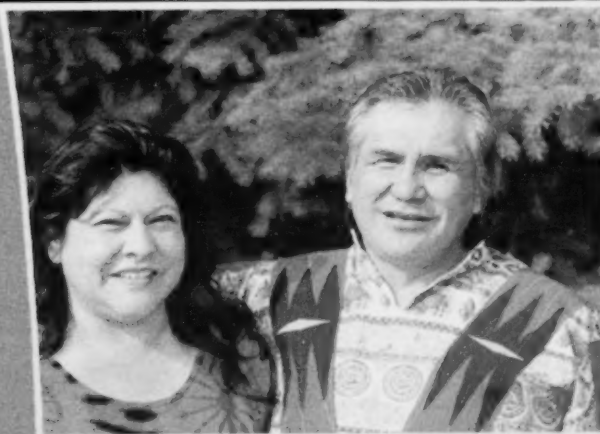
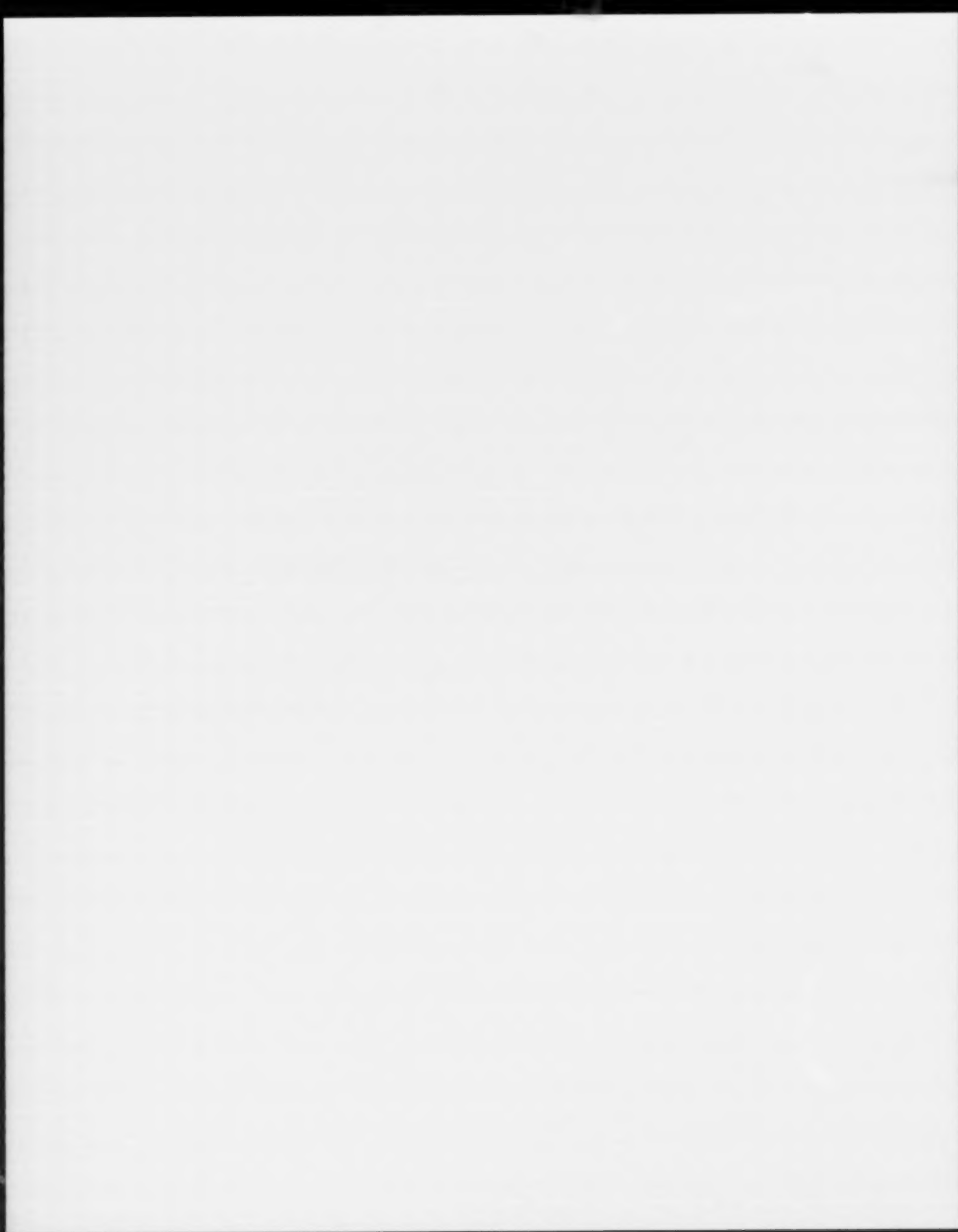


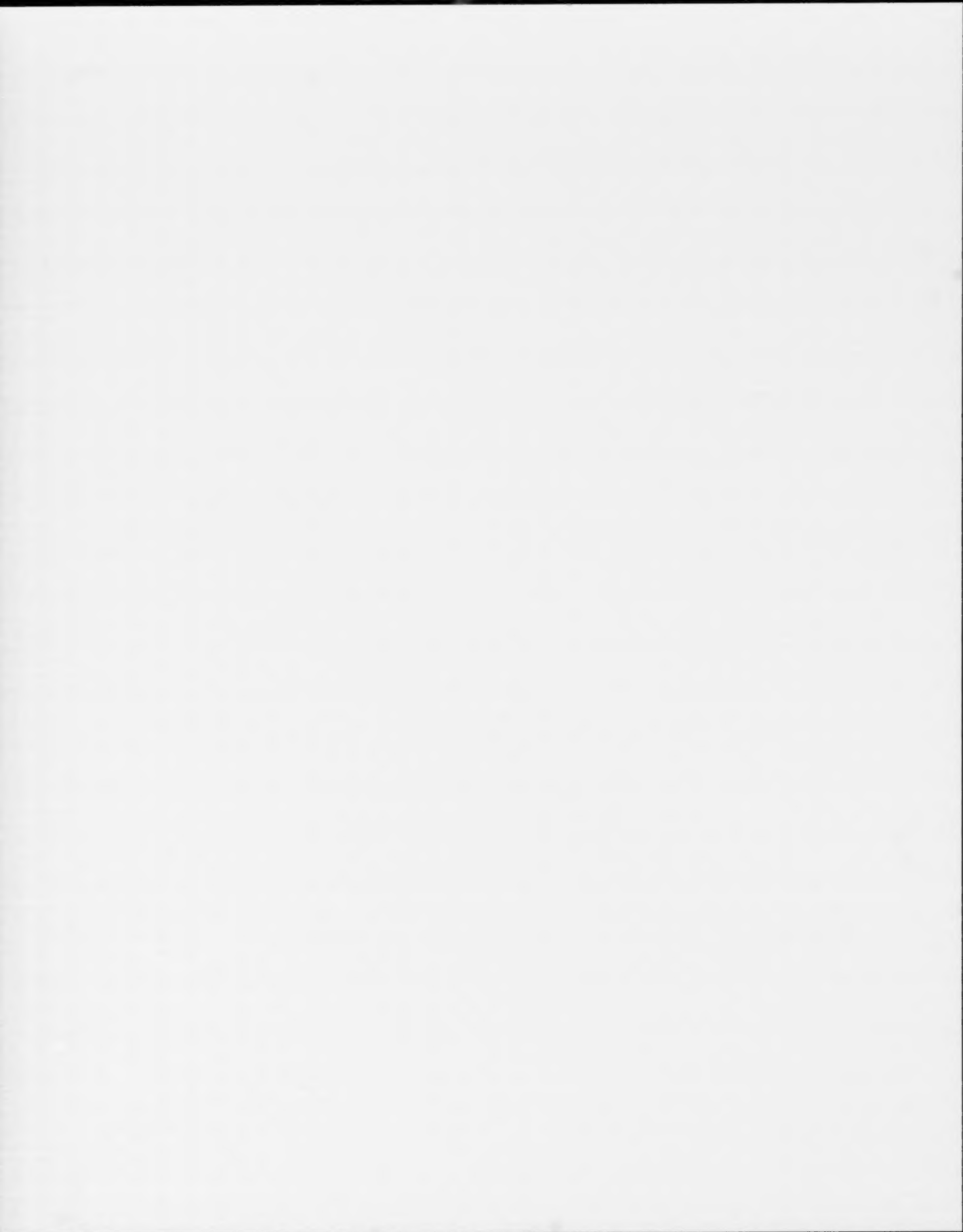
# Annual Report 2016-17





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The Honourable Jim Reiter  
Minister of Health  
Province of Saskatchewan  
Legislative Building  
Regina, Saskatchewan  
S4S 0B3

Dear Minister Reiter:

I have the honour of submitting the Saskatchewan Cancer Agency's annual report including the audited financial statements for the fiscal year ending March 31, 2017.

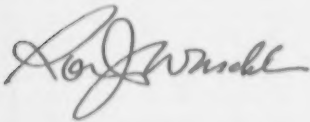
Over the past year, the Cancer Agency maintained its focus on delivering high quality care and programs to the people of Saskatchewan. This was evident in the standing of Accreditation with Commendation received from Accreditation Canada.

In 2016-17 the Cancer Agency continued into year two of its five-year strategic plan paving a clear direction for the organization. The plan provides a framework for patient-centred care with a team approach. The many successes we have had this year in accomplishing aspects of our strategic initiatives shows the commitment and accountability from staff to continuous improvement.

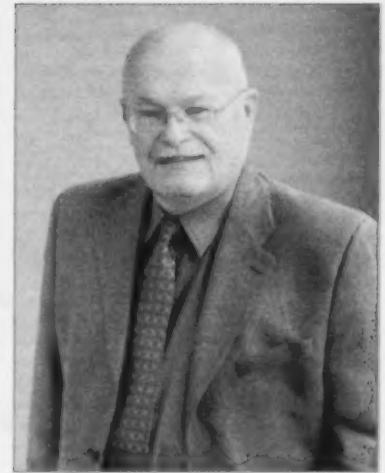
As we look forward, the Cancer Agency will continue its work in developing strategies to improve service and safety, asking patients and their families for feedback, exploring processes and technologies that mitigate risk and create efficiencies, and strengthening our relationships in communities across the province particularly in northern Saskatchewan.

As a board we are pleased to present this annual report which will highlight our work in cancer control for Saskatchewan people.

Respectfully,



Ron Waschuk, Board Chair  
Saskatchewan Cancer Agency



## Message from the Interim President and Chief Executive Officer



In early January 2017 it was announced that Saskatchewan would begin a new chapter in healthcare as it moves to a single provincial health authority. A transition team made up of dedicated and experienced healthcare employees was established to provide advice and recommendations in development of an implementation plan. This team included the president and CEO of the Saskatchewan Cancer Agency and an interim role was created to continue to guide our work in cancer control.

Change is never easy, but throughout this transition our staff, physicians and volunteers were unwavering in their commitment to delivering safe and high quality care to patients. The move to a single health authority affords us the opportunity to consider our programs, services, education and research with a fresh perspective as to how we can improve our collaboration and partnerships throughout the province.

Regardless of the changes taking place in the sector, Saskatchewan people can have peace of mind knowing that cancer care will remain at the same exceptional level it has always been. This is evident as we wrapped up year two of our five-year strategic plan. The strong momentum we established in the first year of the plan has continued in 2016-17, as we saw progress made towards our targets.

Working together with our partners in care we are ensuring that safe, high quality cancer control continues to be a priority and we look forward to what the future holds.

A handwritten signature in black ink that reads "Jon Tonita". The signature is stylized with a large, sweeping "J" and a cursive "Tonita".

Dr. Jon Tonita  
Interim President and Chief Executive Officer

# Who We Are

The Saskatchewan Cancer Agency is a provincial healthcare organization with a legislated mandate to provide cancer control for approximately 1.15 million people in the province.

The Cancer Agency has a long history of providing cancer control since 1930. Together, our more than 830 employees provide clients, patients and families with safe, quality treatment, innovative research, early detection and prevention programs. Our employees are committed to continuously improving our delivery of programs and services.

The Cancer Agency is subject to or governed by the following provincial legislation:

- *The Cancer Agency Act*
- *The Health Information Protection Act*
- *The Local Authority Freedom of Information and Protection of Privacy Act*
- *The Regional Health Services Act*

## TREATMENT

Through the Allan Blair Cancer Centre in Regina and the Saskatoon Cancer Centre, patients have a team of experienced, skilled and dedicated health professionals helping them to understand their diagnosis and make choices on treatment and care.

Each cancer centre offers:

- A supportive care department providing new patient navigation, assistance with practical needs, and counselling for nutritional needs
- A referral centre, operated by registered nurses, that processes new referrals and books patients for appointments
- Treatment and assessment through the Blood and Marrow Transplant Program for patients with advanced blood and circulatory system cancers
- Chemotherapy and radiation therapy to both children and adults

## COMMUNITY ONCOLOGY PROGRAM OF SASKATCHEWAN

We recognize the importance that family and community play in a patient's treatment and recovery. The Community Oncology Program of Saskatchewan (COPS) works together with our healthcare partners to provide patients with care, treatment and support in or closer to their home communities. There are 16 COPS centres located in hospitals throughout Saskatchewan (Estevan, Humboldt, Kindersley, Lloydminster, Meadow Lake, Melfort, Melville, Moose Jaw, Moosomin, Nipawin, North Battleford, Prince Albert, Swift Current, Tisdale, Weyburn and Yorkton).

## RESEARCH

At the Cancer Agency we have world-class researchers who are helping make a difference in treatment, programs and outcomes for patients. We conduct laboratory research, clinical research, including clinical trials, and epidemiology research.

Our vision:

- A healthy population free from cancer

Our mission:

- To provide leadership in health promotion, early detection, treatment and research for cancer

Our values:

- Courage
- Integrity
- Vision Driven
- Innovation
- Collaboration

# Who We Are

## EARLY DETECTION

The Cancer Agency operates three population-based screening programs:

- Screening Program for Breast Cancer, which started in 1990, includes clinics in Regina and Saskatoon and satellite centres in Lloydminster, Moose Jaw, North Battleford, Prince Albert, Swift Current and Yorkton. We also operate a mobile unit that travels to rural Saskatchewan and First Nation communities offering screening mammograms.
- Screening Program for Cervical Cancer which started in 2003
- Screening Program for Colorectal Cancer which started in 2009

## PREVENTION

Through collaboration with communities, organizations and all levels of government, the Cancer Agency works to create conditions in Saskatchewan that improve population health and well-being, and prevent cancer. This is achieved through:

- A health promotion approach to cancer prevention
- A focus on the social, environmental and economic influences that impact health and well-being
- A commitment to health equity

## PATIENT AND FAMILY ADVISORY COUNCIL

At the Cancer Agency we want to provide exceptional care with the client, patient and their family at the centre of every decision we make and action we take. This starts with ensuring patients and their families have a voice about their care and treatment, but also about how services are delivered.

In 2011, we established a Patient and Family Advisory Council (PFAC) with patients, family members and our own staff coming together to:

- Improve the patient and family experience
- Improve the relationship between patients, family and staff
- Channel information, ideas and needs of patients
- Provide input into services and programs

## FUNDRAISING

Philanthropy plays a vital role in the success of our work. The support of our donors enables us to:

- Equip our facilities with the most advanced technology to save lives and improve patient care
- Care for the needs of people from early detection through to treatment
- Fund research that benefits patients and advances our understanding of disease prevention, diagnosis and treatment
- Maintain high levels of quality and satisfaction for patients and employees
- Improve our facilities so we can deliver advanced, efficient care to patients who come through our doors



# Board of Directors

The Cancer Agency is guided by a board of directors appointed by the Lieutenant Governor in Council. The responsibilities of the board include:

- Selecting the chief executive officer and reviewing his or her performance
- Establishing the overall strategic direction and framework for the Cancer Agency, including the mission, vision and values
- Providing financial stewardship by overseeing the financial management of the organization
- Monitoring the overall quality and safety of services and programs for staff and patients
- Establishing and maintaining relationships with key stakeholders
- Maintaining effective governance, which includes annually evaluating the board's effectiveness and that of its committees

The president and chief executive officer (CEO) is the board's link to the administration and day-to-day operations of the Cancer Agency. The CEO is accountable to the board as a whole.

As overseer of a \$171.1 million operating budget, the board brings strong business judgment and expertise to the stewardship of the Cancer Agency. To be successful for such a large and at times complex organization, board members devote a considerable amount of time to meetings and committee work. All of the board's members sit on committees that are designed to help strengthen the Cancer Agency's accountability to the people of this province:

## BOARD ACCOMPLISHMENTS FOR 2016-17

### • Accreditation

Accreditation Canada completed their on-site survey for the Cancer Agency in April of 2016. During the survey, the board actively participated in the review of the Agency's performance on all governance standards, receiving a mention of excellence in this area in the survey results. The Agency met 100 per cent of the required organizational practices and received Accreditation with Commendation.

### • Financial Reporting and Sustainability

Through the Audit Committee, the board fulfils its financial accountability and oversight responsibilities. In 2016-17 the committee worked diligently to oversee the delivery of a balanced budget for the Agency. As part of regular practice, the committee reviewed organizational financial policies, procedures and processes and made revisions to reflect best practices. The committee liaised with the Provincial Auditor to formulate and approve the financial audit plan and the performance audit plan for the audit on the effectiveness of the Screening Program for Breast Cancer. The committee also reviewed the results from both audits.

The board has remained forward-thinking through its financial stewardship and investment lens. During the year, work began toward the establishment of an arms-length foundation to increase investment from fundraising/external sources for cancer care, prevention and research in Saskatchewan.

## BOARD COMMITTEES

### Audit Committee

- Howard Crofts, Chair
- Lionel Chabot
- Doug Finnie
- Ron Waschuk, Ex-officio

### Quality, Safety and Risk Committee

- Dr. Walter Streelasky, Chair
- Lionel Chabot
- Doug Finnie
- Frances Stang
- Louise Frederick, PFAC representative, non-voting member
- Ron Waschuk, Ex-officio

### Governance and Human Resources Committee

- Don Ravis, Chair
- Howard Crofts
- Zeba Ahmad
- Ron Waschuk, Ex-officio

# Board of Directors

"The Board recognizes the role governance plays in partnerships and collaboration. Through this, the Agency has been able to continue to build relationships with the patients and population we serve, with regional counterparts, and other key external stakeholders."

- Ron Waschuk,  
Saskatchewan Cancer  
Agency Board Chair

- **Governance**

Regular efforts are made annually to strengthen and refine board governance practices. The board continues to guide the direction of the organization through the 2015-2020 strategic plan, monitor progress and remain accountable for the organization's performance as a whole.

In September, the Governance Committee reviewed membership of each board committee and made recommended changes which were adopted by the board as a whole. The committee also conducted their evaluation process for the CEO, as well as reviewed and revised their own performance evaluation templates.

At each meeting, the board reviews their governance practice for the session to identify if improvement is required and ensure that discussions, decisions and business remains of a governance nature.

- **Quality Assurance and Safety Oversight**

Governing boards of healthcare organizations carry responsibility to oversee, support and sustain a culture of quality and patient safety.

Through the Quality, Safety and Risk Committee, board members completed all eight modules of the Canadian Patient Safety Institute (CPSI) Effective Governance for Quality and Patient Safety. This training assists the board in understanding core functions related to quality and patient safety, identifying approaches to measuring the quality of care patients receive, and helping to identify where governance practices can be improved related to quality and patient safety.

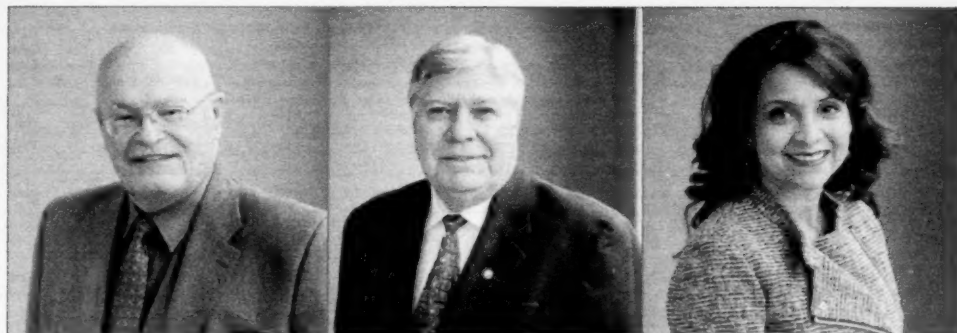
The board places safety as a top priority and begins each meeting discussing measures from both organizational and provincial patient safety perspectives.

Keeping with best practices for transparency, in 2016-17 the Quality, Safety and Risk Committee welcomed a patient and family advisor to their membership.

- **Patient and Family-Centred Care**

The board is committed to ensuring that patients and their families remain the focus of the Cancer Agency's work. They continue to regularly invite patients to share their experience at board meetings and also take a proactive role in hearing the patient voice by attending meetings of the Patient and Family Advisory Council.

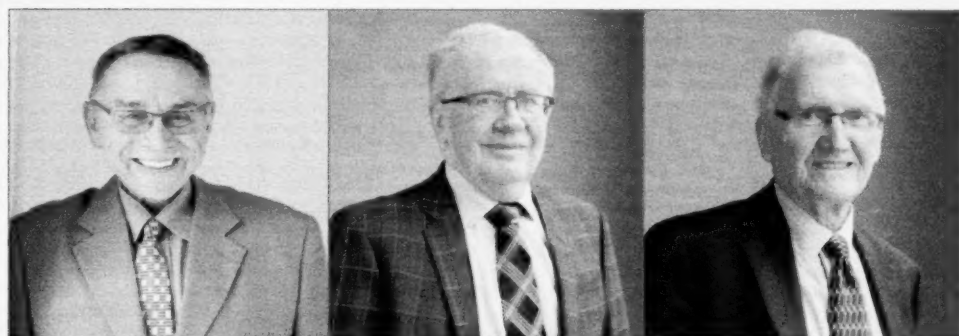
# Board of Directors



Ron Waschuk  
Board Chair, Elkridge

Howard Crofts  
Board Vice Chair, Regina

Zeba Ahmad  
Saskatoon



Lionel Chabot  
North Battleford

Doug Finnie  
Saskatoon

Don Ravis  
Saskatoon

*A brief bio of our board  
members is available at  
[www.saskcancer.ca/board](http://www.saskcancer.ca/board)*



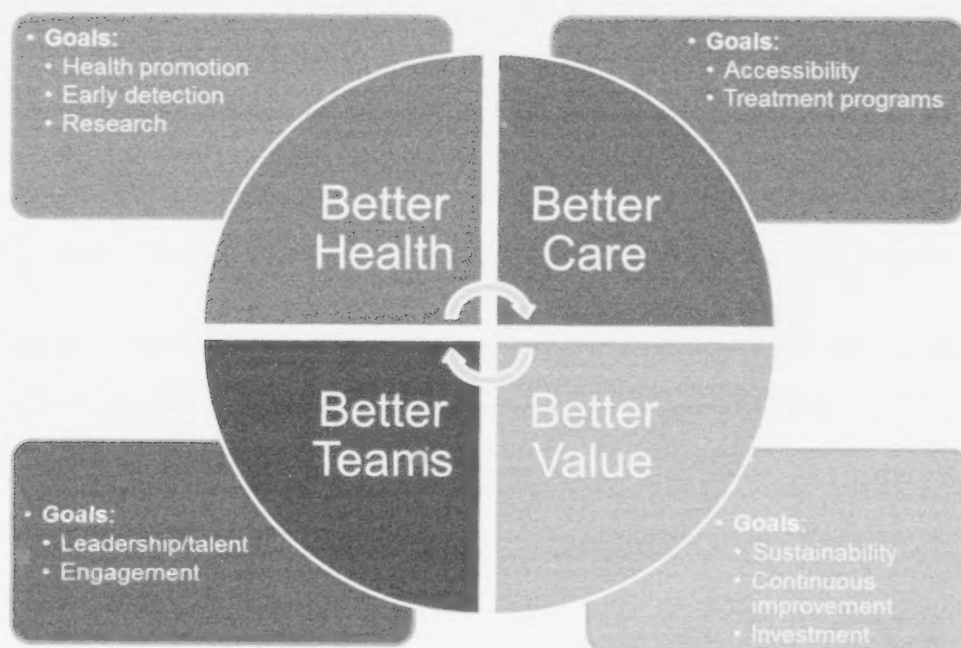
Frances Stang  
Macklin

Dr. Walter Streelasky  
Melville

# Strategic Direction

The Saskatchewan Cancer Agency is guided by four strategic directions. A multi-year plan informs our delivery of care, services, research and programs and ensures our continued commitment to quality, safety and improvement. The driving force behind our goals and helping us move from vision to action is our strong desire to put people first—clients, patients, families, and staff.

## Saskatchewan Cancer Agency Strategic Direction 2015-2020



# Strategic Direction

Significant progress was made on initiatives in year two of the plan:

| Strategies    | Goals            | Initiatives 2016-17                                                     | Progress                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|---------------|------------------|-------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Better Health | Health Promotion | Northern engagement strategy-develop programming for mobile health unit | <ul style="list-style-type: none"> <li>A health bus visited a number of northern communities, collecting feedback from community members and health leaders on how the bus could be used to support northern health priorities</li> <li>Through meetings with northern stakeholders, community engagement and surveys, identified the top health priorities and how the bus could support and strengthen current health programs and services</li> <li>Engaging stakeholders from the north regarding development, design and program planning for the health bus</li> </ul> |
|               | Early Detection  | Endoscopy standards                                                     | <ul style="list-style-type: none"> <li>Completed privacy impact assessment regarding colonoscopy reports</li> <li>Set up data sharing agreements with all regions</li> <li>Developed first adenoma detection rate graphs for endoscopists</li> <li>Met with health regions to present region-specific data</li> </ul>                                                                                                                                                                                                                                                        |
|               |                  | Breast cancer screening service delivery model                          | <ul style="list-style-type: none"> <li>Renewed contracts for mammograms done in satellite centres</li> <li>Negotiating mammography technologists contract renewal with health region</li> <li>Renewed contracts with service vendors</li> <li>Mapped a woman's journey from screening to first diagnostic test</li> </ul>                                                                                                                                                                                                                                                    |
|               | Research         | Provincial cancer research plan                                         | <ul style="list-style-type: none"> <li>Through a continuous improvement workshop the data access process for all requests was streamlined</li> <li>Interviews were conducted with executive and senior leaders as well as PFAC co-chairs to help determine the future direction of research planning</li> </ul>                                                                                                                                                                                                                                                              |

| Strategies   | Goals             | Initiatives 2016-17                               | Progress                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|--------------|-------------------|---------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Better Teams | Leadership/Talent | Comprehensive integrated talent management system | <ul style="list-style-type: none"> <li>All management staff trialed performance and development planning incorporating a coaching approach</li> <li>Coaching skill development sessions held for all managers</li> <li>Piloted a probation process with new managers to better clarify leadership expectations of their new role</li> <li>Development of team effectiveness model with supportive resources to assist leaders in preparing new and existing teams</li> </ul> |
|              | Engagement        | Employee engagement strategy                      | <ul style="list-style-type: none"> <li>Cross functional working groups developed options to strengthen onboarding and recognition workplace practices to implement in 2017-18</li> <li>Employee snapshot surveys indicate growth in engagement and the four key areas identified to improve engagement (senior leadership, recognition, performance development, resources)</li> </ul>                                                                                       |



Northern health bus at St. Joseph's Integrated Services Centre in Île-à-la-Crosse

# Strategic Direction

| Strategies  | Goals              | Initiatives 2016-17                           | Progress                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|-------------|--------------------|-----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Better Care | Accessibility      | Access improvement strategy                   | <ul style="list-style-type: none"> <li>• Working group convened</li> <li>• Baseline measurements of the percentage of referrals that have correct documentation/testing on arrival completed</li> <li>• Regular Saskatoon Cancer Centre referral centre huddles with frontline staff, managers/directors and oncologists</li> <li>• Prioritization of pathology requests for Saskatoon Health Region pathology completed weekly</li> <li>• Agreement on targeted approach for managing referrals received too early</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|             |                    | Service delivery plan                         | <ul style="list-style-type: none"> <li>• Prioritized working initiatives under the service delivery plan. These include: disease site clinics and triage</li> </ul> <p><b>Disease Site Clinics</b></p> <ul style="list-style-type: none"> <li>• Membership of oversight team was decided</li> <li>• Environmental scan completed</li> <li>• New patient count data summaries completed</li> <li>• Project is on hold until mid to late 2017 to accommodate other priorities</li> </ul> <p><b>Triage</b></p> <ul style="list-style-type: none"> <li>• Working group convened</li> <li>• Affirmed future state through previous continuous improvement work and process maps</li> <li>• Environmental scan completed</li> <li>• Began developing provincial triage guidelines by disease site. Completed gastrointestinal, lung, and central nervous system</li> <li>• Confirmed CMS triage requirements and established ongoing requirements</li> <li>• Implemented site-specific triage in Saskatoon Cancer Centre and Allan Blair Cancer Centre</li> </ul> |
|             | Treatment Programs | Clinical management system 2016-17 priorities | <ul style="list-style-type: none"> <li>• Super users and empowered users were put in place to help define processes</li> <li>• Change management resources were put in place</li> <li>• Voice recognition software ready for implementation</li> <li>• Readiness assessments completed for physicians</li> <li>• Weigh scale and vital sign monitor pilot project completed</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|             |                    | Pediatric oncology program model              | <ul style="list-style-type: none"> <li>• Completed review of pediatric oncology by external consultant</li> <li>• Ongoing discussions on the model of care</li> <li>• Further discussions awaiting outcome of establishment of the provincial health authority</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |



# Strategic Direction

| Strategies   | Goals                                    | Initiatives 2016-17                                  | Progress                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|--------------|------------------------------------------|------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Better Value | Sustainability                           | National/provincial partnership strategy             | <ul style="list-style-type: none"> <li>• Smart Pump implemented at both cancer centres</li> <li>• Standardized provincial drug library</li> <li>• Linen supply chain provincial initiative implemented at the cancer centres and for early detection programs</li> </ul>                                                                                                                                                                                                                                                                                                                                                             |
|              | Continuous Improvement                   | Saskatchewan Healthcare Management System            | <ul style="list-style-type: none"> <li>• A total of 49% of business units are set up with daily visual management practices</li> <li>• A total of 55% of targeted areas have implemented a new inventory management system of medical and office supplies</li> <li>• Continuous improvement training has been delivered to 43% of managers</li> <li>• Six continuous process improvement events conducted during the year</li> </ul>                                                                                                                                                                                                 |
|              |                                          | Enterprise risk management program                   | <ul style="list-style-type: none"> <li>• "Take a TEAM Moment" was developed and roll out began</li> <li>• Completed an enterprise risk management framework document</li> <li>• Enhanced root cause analysis processes to prevent recurrence of identified risks</li> <li>• Linked enterprise risk management risk identification to the Agency's strategic planning process</li> <li>• Closed 692 unusual occurrence management system (UOMS) occurrences</li> <li>• Met Accreditation Canada's risk management requirements</li> </ul>                                                                                             |
|              | Fund Development/<br>Facility Investment | Arms-length charitable foundation                    | <ul style="list-style-type: none"> <li>• Six board members accepted a role on the board and officers (chair, vice-chair and secretary treasurer) were elected</li> <li>• The board agreed to a name for incorporation and the appropriate files were provided to Information Services Corporation to establish a legal entity</li> </ul>                                                                                                                                                                                                                                                                                             |
|              |                                          | Facility infrastructure plan and related renovations | <p><b>Saskatoon Cancer Centre redevelopment</b></p> <ul style="list-style-type: none"> <li>• Renovations underway to consolidate systemic therapy services on one floor in addition to work that is underway to develop disease site clinic space</li> <li>• Renovations to be completed by June 2017</li> </ul> <p><b>University Heights (Saskatoon) redevelopment</b></p> <ul style="list-style-type: none"> <li>• Renovations completed which allowed for consolidation of off-site locations</li> <li>• Screening Program for Breast Cancer along with other departments and administrative staff are in one location</li> </ul> |



Allan Blair Cancer Centre nursing staff with the Hospira Plum 360 IV

# The Heart of our Work

## BETTER HEALTH

### Early Detection



Early detection is an important part of a healthy lifestyle. Finding and treating cancer at an early stage increases the chances for successful treatment and survival. The Saskatchewan Cancer Agency works to ensure eligible Saskatchewan residents are aware of the screening programs available to them. This past year, the Agency changed the name of the Prevention Program for Cervical Cancer to the Screening Program for Cervical Cancer. This was done to create better alignment with the other early detection programs – the Screening Program for Breast Cancer and the Screening Program for Colorectal Cancer – and to put Saskatchewan in line with most other Canadian provinces who have adopted the same language.

"Changing the name of the Prevention Program for Cervical Cancer will help drive home the point that a Pap test is a cancer screening tool," said Dr. Jon Tonita, Interim President and CEO. "Under this new name, the Agency will continue to operate the program with the same potential life-saving benefits."

Through the Screening Program for Cervical Cancer, the Agency works to provide education about cervical cancer and the benefits of screening, inform women when they are due for a Pap test, notify women of their Pap test results, and communicate with care providers to ensure appropriate follow-up of abnormal Pap test results. This partnership between clients, the Cancer Agency and healthcare providers saves lives.

### Partners in Primary Prevention

The Cancer Agency works with many partners across the province and in the community to improve health and reduce the chances of developing cancer. One of our community-based partnerships is with the Saskatchewan Alliance for Youth and Community Well-being (SAYCW). The SAYCW, which is co-chaired by the Cancer Agency, is a partnership between health, education and other community stakeholders dedicated to improving the health and well-being of the Saskatchewan population.



The SAYCW implemented a provincial youth survey in 2015 and invited students from grades 7 to 12 to participate. The survey asked a series of questions related to oral health, sun and ultraviolet radiation (UVR) safety, healthy weights, nutrition, physical activity, sleep, mental health and well-being, tobacco, drug and alcohol use, and sexual health. The provincial report was compiled in 2016 and contained aggregate information from the schools that participated including rural, urban and on-reserve schools. Each of the schools received an individual report that included information about their students only.

The results show that:

- 57 per cent of students thought their health was either very good or excellent
- Almost two in three students had been bullied in some way in the last year
- 38 per cent of male students and 59 per cent of female students had felt sad or hopeless enough during the last year that they stopped their regular activities for a period of time
- Nearly half of the students spent more than the recommended maximum of two hours on recreational screen time during weekdays
- 22 per cent of students had ever tried drugs and 32 per cent had ever used alcohol at least once

## The Heart of our Work

"The information from the report will help schools, communities and others to have important discussions on youth health and well-being and to begin to put in place programs that can address the results," said Rob Currie, past SAYCW Co-chair and current Deputy Minister of Education, in a 2016 news release. The full provincial report is available at [www.saycw.com](http://www.saycw.com).

The Cancer Agency also works with other organizations like Sun Smart Saskatchewan to provide information and awareness about the importance of safe sun practices. Monitoring how people are protecting themselves from the sun's harmful rays is an important component of this work. This was the focus of one of this past year's projects of Sun Smart Saskatchewan, a coalition of partners committed to the prevention of skin cancer in the province.

In 2016 Sun Smart Saskatchewan conducted a shade audit in Saskatoon at River Landing, a popular destination along Saskatoon's riverfront. A shade audit is a process for identifying how an outdoor space is used and whether existing sources of shade (natural or built) provide sufficient protection from ultraviolet radiation for the users.

"Shade is an important element in skin cancer prevention that needs to be considered as people get out and enjoy Saskatchewan's attractions and natural spaces," said Dr. Michael Schwandt, Deputy Medical Health Officer for Saskatoon Health Region, and Chair of Sun Smart Saskatchewan in a 2016 news release. "And we are hoping that this audit can be an important first step we can share with city planners and others as they consider how space is used and if the shade supports the activities in the area."

### BETTER TEAMS

#### Building Relationships

The Cancer Agency strives to reach out to all corners of the province to connect with urban, rural and First Nation communities to build relationships and better understand the needs of different populations. One example of this is the First Nations and Métis Cancer Surveillance Program, a pilot project which began in 2014. The three-year program, funded by the Canadian Partnership Against Cancer, was created to track data related to the numbers and types of cancers in these communities. It changed course early on once participants identified needs around prevention and screening.

Five communities (Ochapowace First Nation, Île-à-la-Crosse, Pinehouse, English River First Nation and Battle River Treaty 6 Health Centre) participated in the program, each taking their own route, depending on their community needs. Community projects included lunch and learn sessions about cancer screening, treatments and survival awareness, integrating cancer prevention education in their schools, and having candid conversations about cancer. Among the projects at Ochapowace First Nation was a painting completed by Grade 11 and 12 students. The artwork, which will be hung in the Allan Blair Cancer Centre, is intended to instill hope in patients.

This initiative was all about hearing directly from the people and working alongside them to begin a new conversation that would bridge the gaps that exist between care and understanding of cancer, between culturally appropriate programs and traditional healthcare. It's a conversation that will continue into the future, with everyone learning from one another.



Visit [www.sunsmartsks.ca](http://www.sunsmartsks.ca) for more information

"Healthcare is about more than medical treatments; it needs to be inclusive of holistic care and that includes working with indigenous people to understand their needs and traditions,"

- Dr. Jon Tonita

"If the goal really is to make a difference for communities, you absolutely must work truly with the communities. You have to meet the communities first and find out where they're at."

- Dr. Molly Trecker, First Nations and Métis Cancer Surveillance Lead

## The Heart of Our Work



Chris Kunitz brought the Stanley Cup to Regina for a fundraising autograph session to benefit the Allan Blair Cancer Centre

### Donors as Partners in Care

The Cancer Agency is fortunate to have the continued support of people and organizations who are committed to making a difference in their communities. These generous individuals and groups assist us in our work through philanthropic donations.

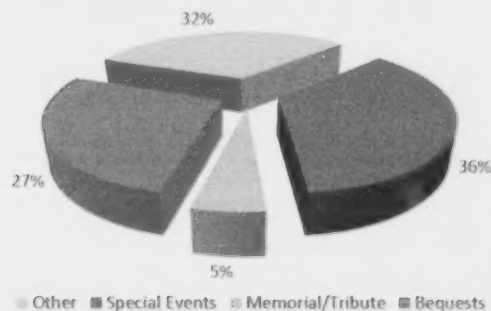
This is done through the partnerships of special events such as the C95 Radio Marathon for Breast Cancer Research, Choc'laCure, Prairie Women on Snowmobiles, Brayden Ottenbreit Close Cuts for Cancer, Thom Collegiate's Beat Cancer initiative, Ladies of Harley and many others. These events held annually in our province help fund research, equipment and patient comfort programs that benefit all patients.

Donations are also received through memorial and tribute giving, through the realization of gifts in wills and from individuals and corporations.

To further support the efforts of the Cancer Agency, work has begun to create an arms-length charitable foundation. The Cancer Agency will continue to manage donor relations until the foundation is established.

In 2016-17 the Agency had 4,956 donors and received 5,498 gifts totaling more than \$2.4 million.

Funding by Type



### Culture of Safety

While the Cancer Agency works to establish and manage relationships with external partners, there is an equal emphasis on partnerships internal to the Agency. Everyone at the Cancer Agency is committed to ensuring processes and facilities are safe for employees, clients and patients. Patient and staff safety is our priority and we are always looking for ways to improve.

In June of 2016, staff and patients came together to look at how the Cancer Agency could implement the provincial Stop the Line safety process. Early on staff and patients felt that the use of the term "stop the line" did not fit with the approach the organization wanted to take. Instead the group came up with the slogan, together everyone accomplishes more (TEAM) which was then used as take a TEAM moment rather than stop the line.



# The Heart of Our Work

Taking a TEAM moment is a way of improving safety and preventing harm by having staff feel comfortable in identifying and fixing potentially harmful situations in the moment or getting assistance to be able to safely continue. By working together, staff can support one another in discussing the best option to safely provide care or continue an activity.

While the Cancer Agency is using different language than the provincial strategy, both programs are based in the belief that making healthcare SAFER is everyone's responsibility. SAFER means:

- Stop if you see something that is unsafe.
- Assess the situation. Ask for support from others, supervisors, or leaders.
- Fix the unsafe situation if you can. If you can't, then . . .
- Escalate your concern. Call in help from a team member or leader.
- Report unsafe situations, environments, and practices, including both instances of no harm and incidents that have resulted in harm to patients or staff. We can't improve what we don't know about.

Culture change is no small feat. Employee engagement sessions have been held as a part of the take a TEAM moment safety program rollout. Videos for staff training have also been created to help employees foster a culture of safety.

## BETTER CARE

### State-of-the-Art Treatment

While the Cancer Agency is improving processes, we're also improving cancer treatments for our patients. Patients receiving radiation therapy at the Allan Blair Cancer Centre in Regina now have access to the most advanced equipment available, with the installation of a TrueBeam linear accelerator (linac) and completion of the associated renovations in 2017. The provincial government has also provided funding for a similar replacement linac in Saskatoon.

"Installing new linear accelerators in Regina and Saskatoon will make a difference in the lives of cancer patients," Dr. Tonita said. "This equipment opens the door to new treatment possibilities for cancers in the lung, breast, prostate and spinal regions."

"We have provided strong financial support to ensure excellence in cancer care for our patients," said Minister Responsible for Rural and Remote Health Greg Ottenbreit in a news release. "Providing funds for state-of-the-art equipment is a way to improve access, shorten treatment times, improve precision and offer advanced care."

The TrueBeam can deliver higher doses of radiation more quickly and with greater precision. It also provides better integration with imaging systems than any current or previous machines used. The customizable system will provide cancer patients with leading edge treatment techniques.

During 2016-17 more than 37,000 radiotherapy sessions were conducted in Saskatchewan.



TOGETHER EVERYONE ACCOMPLISHES MORE



Minister Responsible for Rural and Remote Health Greg Ottenbreit and Cancer Agency Interim President and CEO Dr. Jon Tonita with the new TrueBeam linear accelerator

# The Heart of Our Work

## Supporting Patients During Treatment

Even with the most advanced equipment, cancer patients may still experience side effects from the treatment and the disease. Cancer-related fatigue is one of the most common symptoms felt by patients. It is a tiredness that often lasts a long time and does not go away with rest or sleep. However, by providing patients with information and tips, they can live well with cancer-related fatigue.

Ensuring patients have access to the information was one of the goals of a partnership between the Saskatchewan Cancer Agency, CancerCare Manitoba and CancerControl Alberta. Together the three cancer organizations created a series of videos, called Living Well with Cancer Related Fatigue. The videos, funded by the Canadian Partnership Against Cancer, use real patient stories and information provided by local provincial clinical experts to illustrate practical tips that can help patients cope with fatigue.

"Each person's experience is different but knowing how to manage cancer-related fatigue can improve a patient's physical and emotional well-being and quality of life," said Deb Bulych, Director of Supportive Care.

The videos are available online, along with a booklet, which has been distributed to clinical care providers.

## Patient and Family Advisory Council

The Cancer Agency is proud of its focus on patient-centred care, providing patients with a platform for input in how cancer care is delivered in Saskatchewan. Since its establishment in 2011, the Cancer Agency's Patient and Family Advisory Council has provided patients and their families a voice in the work of the organization. By collaborating in the development, delivery and design of policy and programs, we ensure we are doing everything we can to provide exceptional, quality care.

In 2016-17 the Patient and Family Advisory Council continued its efforts in advancing patient and family-centred care. Twenty-five patients and families contributed more than 850 hours of their time to the council, sharing their patient stories, and partnering with staff through opportunities such as continuous improvement workshops.

Council Chair Scott Sutton notes, "In my time as chair of the council, I continue to see incredible effort by staff to involve patients and families in making improvements. The culture of the Agency supports this collaboration. Staff are honest and open and advisors feel truly respected and listened to. Overall, we continue to put the patient at the heart of what we do and progress on our journey together as a patient-centred organization."

Notable achievements of the council in 2016-17 included

- Continued engagement in organizational policy, procedure and facility development
- Finalization of the patient and staff charter
- Development of a long-term vision for the council
- Patient advisor membership at the Cancer Agency Board of Directors' Quality, Safety and Risk Committee
- Creation of a model designed to align engagement opportunities for patients and families in a meaningful way that respects individual knowledge, perspectives and needs

The Cancer and Fatigue video series is available online at [www.saskcancer.ca/fatiguevideos](http://www.saskcancer.ca/fatiguevideos)



PFAC members Mary Lee Simpson and Scott Sutton at PFAC Awareness Day

# The Heart of Our Work

## Accreditation

Feedback from patients and partners in healthcare helps the Cancer Agency on its journey in continuous improvement. Regular evaluation by Accreditation Canada also greatly assists us in measuring our performance.

This past year, the Cancer Agency spent time participating in an on-site accreditation survey with Accreditation Canada. The survey, which is done every four years, assesses compliance at healthcare organizations with nationally accepted standards for patient care. The Cancer Agency received Accreditation with Commendation, which is the second highest standing a health organization can receive.

The Agency was assessed against requirements in four key areas: leadership, governance, clinical programs and services. The Agency met 100 per cent of Accreditation Canada's required organizational practices when it comes to safety and quality improvement.

The next scheduled accreditation for the Cancer Agency will be in 2020.

## Research

Research is vital to preventing cancer and improving cancer control for Saskatchewan people. Research has helped develop better drug regimens and can also help identify specific screening or early detection programs that can reduce the prevalence of cancer. At the Cancer Agency we are very proud of the work of our researchers and the advancements that are coming as a result of their work.

Cancer Agency research scientist Dr. Franco Vizeacoumar and University of Saskatchewan professor Dr. Andrew Freywald made a laboratory discovery this past year that may result in a new treatment for the subgroup of patients with breast cancers that are missing a new molecular marker called EphB6.

The EphB6 molecule is a necessary component of a healthy, noncancerous cell, and targeting a gene called SRC might kill breast cancer cells lacking EphB6. Drs. Vizeacoumar and Freywald found an inhibitor of SRC that had been used before to try and treat triple-negative breast cancer.

In human breast cancers lacking EphB6 that were grown in preclinical mouse models, very promising results were obtained upon treatment with an SRC inhibitor. Since SRC inhibitors already have Food and Drug Administration (FDA) approval for use in humans, it is hoped that a new clinical trial could be started soon to provide new treatment options for patients with EphB6-deficient breast cancer.

"Targeted therapies are only really there for other types of breast cancer, but not for triple-negative breast cancer," said Dr. Vizeacoumar. "Now we can tailor the kind of treatment for this breast cancer. So patients that have lost the EPHB6 can actually be treated."

This type of research shows not only the ingenuity of our researchers and their colleagues, but also reflects their dedication to making a difference for patients.

"Being awarded Accreditation with Commendation is a direct result of our commitment to safety for our staff and patients."

- Dr. Jon Tonita



Dr. Andrew Freywald, University of Saskatchewan professor, and Dr. Franco Vizeacoumar, Cancer Agency research scientist

# The Heart of Our Work



"Patients will soon have access to additional clinic and chemotherapy space which will help improve not just access and safety but their experience when they come to the cancer centre for treatment. We're working to improve our patients' experience by creating a warm, safe and welcoming environment for them."

- Dr. Jon Tonita

## BETTER VALUE

### Cancer Centre Redevelopment

Among the principles driving research at the Cancer Agency is that every cancer patient who walks through our doors deserves the very best treatment and services available. This is the very same belief that is behind the Agency's work in redeveloping the chemotherapy area at the Saskatoon Cancer Centre.

From the very initial stages of the project, staff at all levels along with patients have been involved in the development of floor plans. This approach has given staff and patients a voice in how to use the area to improve flow, access and safety for patients and staff. The redevelopment includes consolidating all systemic therapy services for adults and pediatric patients, creating clinic rooms on the ground floor, and improving patient access to the pharmacy dispensary.

When completed there will be a warm, welcoming space for care and treatment including:

- Five chemotherapy pods (25 treatment chairs)
- Two chemotherapy treatment rooms
- Patient procedure room
- Chemotherapy stretcher unit
- Pediatric treatment area
- Multidisciplinary coordination room
- Pharmacy preparation and program space
- Better line of sight for nurses to ensure patient safety

The project will be completed in 2017-18.

## MOVING FROM MISSION TO ACTION

Through continuous improvement of processes, services and facilities, the Cancer Agency works to better serve Saskatchewan residents. Incremental improvements also help the Agency to better manage change. We're able to adapt and adjust our direction as required. This flexibility is demonstrated in our willingness and ability to readily respond to changing circumstances.

Saskatchewan is experiencing a rate of growth that brings many new opportunities and many new challenges both economically and from a health perspective. Ensuring that we have a strong plan and direction to guide our work is important if we are to ensure we are meeting the challenge of the growth.

"The hard work and dedication demonstrated by the Agency's staff this year has resulted in continuous improvements and quality care for clients and patients. I'm proud to work with such a value-driven organization," said Dr. Tonita.

In 2016-17 the Cancer Agency marked 87 years of caring for Saskatchewan residents through research, prevention, screening, early detection and treatment. This report provides a snapshot of the work the Cancer Agency does each day to provide better health, better care, better value and better teams for the people of this province.

# Progress by the Numbers

| Clinical Services                            | Allan Blair Cancer Centre |         |         |         | Saskatoon Cancer Centre |         |         |         | Provincial Total |         |         |         |
|----------------------------------------------|---------------------------|---------|---------|---------|-------------------------|---------|---------|---------|------------------|---------|---------|---------|
|                                              | 2013/14                   | 2014/15 | 2015/16 | 2016/17 | 2013/14                 | 2014/15 | 2015/16 | 2016/17 | 2013/14          | 2014/15 | 2015/16 | 2016/17 |
| <b>Number of New Patient Appointments</b>    |                           |         |         |         |                         |         |         |         |                  |         |         |         |
| - Medical oncology                           | 1,635                     | 1,570   | 1,448   | 1,425   | 1,564                   | 1,501   | 1,600   | 1,779   | 3,199            | 3,071   | 3,048   | 3,204   |
| - Radiation oncology                         | 1,302                     | 1,327   | 1,317   | 1,389   | 1,433                   | 1,477   | 1,455   | 1,591   | 2,735            | 2,804   | 2,772   | 2,980   |
| - Pediatric oncology                         | 16                        | 13      | 22      | 14      | 26                      | 43      | 40      | 32      | 42               | 56      | 62      | 46      |
| - Hematology                                 | 187                       | 203     | 232     | 230     | 250                     | 348     | 353     | 392     | 437              | 551     | 585     | 622     |
| <b>Number of Review Patient Appointments</b> |                           |         |         |         |                         |         |         |         |                  |         |         |         |
| - Systemic oncology                          | 15,781                    | 16,488  | 15,655  | 17,607  | 16,060                  | 17,317  | 17,592  | 20,187  | 31,841           | 33,805  | 33,247  | 37,794  |
| - Radiation oncology                         | 4,611                     | 5,185   | 5,475   | 6,021   | 6,527                   | 7,265   | 7,014   | 6,829   | 11,138           | 12,450  | 12,489  | 12,850  |
| - Pediatric oncology                         | 893                       | 800     | 763     | 812     | 1,211                   | 1,350   | 1,645   | 1,544   | 2,104            | 2,150   | 2,408   | 2,356   |
| <b>Radiation Therapy Workload Statistics</b> |                           |         |         |         |                         |         |         |         |                  |         |         |         |
| - Treatment sessions started                 | 908                       | 960     | 946     | 959     | 1,016                   | 1,054   | 933     | 1,023   | 1,924            | 2,014   | 1,939   | 1,982   |
| - Fractions (number of treatment sessions)   | 16,891                    | 17,605  | 16,749  | 17,891  | 19,492                  | 20,650  | 19,777  | 19,148  | 36,383           | 38,255  | 35,873  | 37,039  |
| - Fields (number of beams delivered)         | 93,813                    | 107,563 | 93,736  | 88,018  | 89,488                  | 109,302 | 75,389  | 69,762  | 183,301          | 216,865 | 169,125 | 157,780 |
| <b>Chemotherapy Treatments</b>               |                           |         |         |         |                         |         |         |         |                  |         |         |         |
| - Treatment visits                           | 8,996                     | 9,318   | 9,683   | 9,889   | 10,489                  | 11,055  | 11,458  | 11,906  | 19,485           | 20,373  | 21,141  | 21,795  |
| - Number of patients                         | 1,258                     | 1,288   | 1,266   | 1,258   | 1,484                   | 1,534   | 1,528   | 1,566   | 2,742            | 2,822   | 2,794   | 2,824   |

| Access                                                                             | 2013/14 |    |    |    | 2014/15 |    |    |    | 2015/16 |    |    |    | 2016/17 |    |    |    |
|------------------------------------------------------------------------------------|---------|----|----|----|---------|----|----|----|---------|----|----|----|---------|----|----|----|
|                                                                                    | Q1      | Q2 | Q3 | Q4 | Q1      | Q2 | Q3 | Q4 | Q1      | Q2 | Q3 | Q4 | Q1      | Q2 | Q3 | Q4 |
| <b>Number of Days Between Referral and First Appointment (90th percentile)</b>     |         |    |    |    |         |    |    |    |         |    |    |    |         |    |    |    |
| - Medical oncology                                                                 | 57      | 55 | 70 | 72 | 69      | 73 | 72 | 71 | 69      | 72 | 75 | 68 | 77      | 79 | 74 | 83 |
| - Radiation oncology                                                               | 38      | 42 | 46 | 49 | 49      | 60 | 53 | 71 | 48      | 45 | 57 | 51 | 48      | 50 | 50 | 58 |
| <b>Number of Days Between Ready to Treat and First Treatment (90th percentile)</b> |         |    |    |    |         |    |    |    |         |    |    |    |         |    |    |    |
| - Chemotherapy                                                                     | 11      | 13 | 14 | 15 | 15      | 15 | 12 | 12 | 13      | 11 | 13 | 13 | 11      | 13 | 14 | 13 |
| - Radiation therapy                                                                | 18      | 14 | 14 | 17 | 16      | 15 | 15 | 20 | 20      | 19 | 18 | 19 | 17      | 18 | 16 | 18 |

| Stem Cell Transplants                   | 2013/14 | 2014/15 | 2015/16 | 2016/17 |
|-----------------------------------------|---------|---------|---------|---------|
| Number of allogeneic transplants        | 22      | 22      | 9       | 25      |
| Number of autologous transplants        | 44      | 53      | 40      | 42      |
| Number of patients sent out of province | 4       | 2       | 0       | 0       |

| Number of Influenza Vaccines | 2013/14 | 2014/15 | 2015/16 | 2016/17 |
|------------------------------|---------|---------|---------|---------|
| Patients                     | 593     | 944     | 827     | 669     |
| Family and caregivers        | 315     | 575     | 574     | 453     |
| Staff                        | 428     | 599     | 408     | 410     |

| Safety                                    | 2013/14 | 2014/15     | 2015/16     | 2016/17     |
|-------------------------------------------|---------|-------------|-------------|-------------|
| Sick leave hours per FTE                  | 61.07   | 62.34       | 65.72       | 67.56       |
| Wage-driven premium hours per FTE         | 21.40   | 16.95       | 14.21       | 13.59       |
| Lost time workplace injuries per 100 FTEs | 1.01    | 0.63        | 0.62        | 0.6         |
| Critical Incidents                        | 0       | 1*          | 1**         | 2           |
| Falls                                     | N/A     | 19 patients | 12 patients | 16 patients |
|                                           |         | 11 staff    | 13 staff    | 13 staff    |

\*No patients or individuals were harmed, rather this incident stems from a delay in notifying clients of abnormal test results for the Screening Program for Colorectal Cancer.

\*\*One client, later diagnosed with cancer, was potentially harmed due to a missed opportunity to receive testing through the Screening Program for Colorectal Cancer. The Cancer Agency has completed the root cause analysis and corrective actions were taken to address the gaps.

# Progress by the Numbers

| Pharmacy Services                             | 2013/14 | 2014/15 | 2015/16 | 2016/17 |
|-----------------------------------------------|---------|---------|---------|---------|
| <b>Number of Oral Prescriptions Processed</b> |         |         |         |         |
| - Allan Blair Cancer Centre                   | 30,240  | 26,666  | 24,658  | 24,381  |
| - Saskatoon Cancer Centre                     | 37,363  | 28,128  | 32,431  | 32,402  |
| - Provincial                                  | 67,603  | 54,794  | 57,089  | 56,783  |
| <b>Number of IV Medications - Inpatient</b>   |         |         |         |         |
| - Allan Blair Cancer Centre                   | 3,555   | 3,034   | 2,459   | 2,980   |
| - Saskatoon Cancer Centre                     | 2,665   | 2,931   | 3,208   | 4,462   |
| - Provincial                                  | 6,220   | 5,965   | 5,667   | 7,442   |
| <b>Number of IV Medications - Outpatient</b>  |         |         |         |         |
| - Allan Blair Cancer Centre                   | 22,927  | 22,944  | 21,875  | 21,406  |
| - Saskatoon Cancer Centre                     | 23,869  | 25,415  | 24,468  | 25,323  |
| - Provincial                                  | 46,796  | 48,359  | 46,343  | 46,729  |
| <b>Number of COPS Orders Dispensed</b>        |         |         |         |         |
| - Through the Allan Blair Cancer Centre       | 4,714   | 5,644   | 7,042   | 6,734   |
| - Through Saskatoon Cancer Centre             | 4,108   | 4,622   | 5,790   | 7,084   |
| - Provincial                                  | 8,822   | 10,266  | 12,832  | 13,818  |

| Clinical Trials                                 | 2013/14 | 2014/15 | 2015/16 | 2016/17 |
|-------------------------------------------------|---------|---------|---------|---------|
| Number of patients enrolled to a clinical trial | 125     | 136     | 89      | 131     |
| Per cent of new patients enrolled               | 3.1%    | 3.4%    | 2.2%    | 3.4%    |

| Community Oncology Program of Saskatchewan   | 2013/14   | 2014/15    | 2015/16   | 2016/17   |
|----------------------------------------------|-----------|------------|-----------|-----------|
| Number of patients                           | 1,713     | 1,877      | 1,786     | 1,899     |
| Number of treatment visits                   | 10,928    | 12,153     | 12,948    | 13,106    |
| Number of kilometres saved in patient travel | 7,221,900 | 3,735,707* | 3,953,018 | 4,067,360 |

\*Measurement methodology changed in 2014/15 that takes other factors into consideration beyond distance just to Regina and Saskatoon.

| Telehealth Appointments                                   | 2014/15 | 2015/16   | 2016/17   |
|-----------------------------------------------------------|---------|-----------|-----------|
| Allan Blair Cancer Centre appointments                    | 1,059   | 2,175     | 2,895     |
| Saskatoon Cancer Centre appointments                      | 629     | 1,170     | 2,828     |
| Number of kilometres saved in patient travel (provincial) | 589,692 | 1,554,680 | 2,295,365 |

## Progress by the Numbers

| Screening Program for Breast Cancer                                                                  | 2013/14               | 2014/15               | 2015/16               | 2016/17               |
|------------------------------------------------------------------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Number of screening mammograms on the mobile unit                                                    | 8,390                 | 8,137                 | 9,022                 | 8,266                 |
| Number of screening mammograms at the Regina centre                                                  | 11,488                | 10,999                | 10,305                | 11,304                |
| Number of screening mammograms at the Saskatoon centre                                               | 8,445                 | 8,803                 | 8,613                 | 8,961                 |
| Satellite centres (Lloydminster, Moose Jaw, North Battleford, Prince Albert, Swift Current, Yorkton) | 10,744                | 10,205                | 10,314                | 9,990                 |
| Total number of mammograms                                                                           | 39,067                | 38,144                | 38,254                | 38,521                |
|                                                                                                      | April 2012-March 2014 | April 2013-March 2015 | April 2014-March 2016 | April 2015-March 2017 |
| Participation rate                                                                                   | 41.5%                 | 41.0%                 | 40.3%                 | 40.3%                 |

| Screening Program for Cervical Cancer           | 2013/14               | 2014/15               | 2015/16               | 2016/17               |
|-------------------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Number of Pap tests completed in health regions | 103,368               | 100,257               | 97,628                | 95,244                |
|                                                 | April 2011-March 2014 | April 2012-March 2015 | April 2013-March 2016 | April 2014-March 2017 |
| Participation rate (non-hysterectomy corrected) | 57.8%                 | 55.6%                 | 55.2%                 | 55.2%                 |

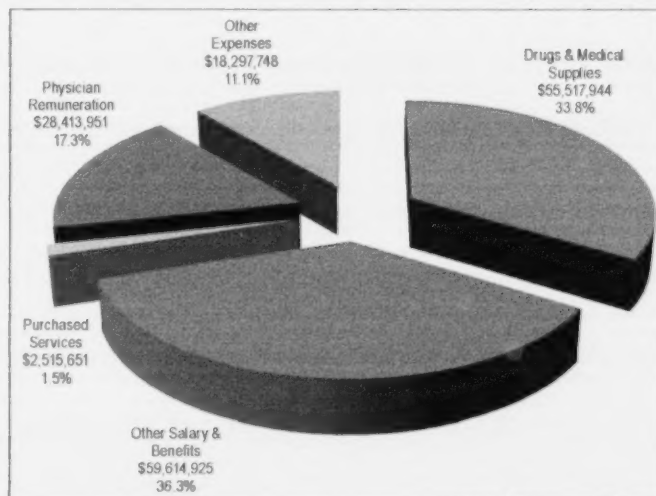
| Screening Program for Colorectal Cancer                                          | April 2012- March 2014 | April 2013-March 2015 | April 2014-March 2016 | April 2015-March 2017 |
|----------------------------------------------------------------------------------|------------------------|-----------------------|-----------------------|-----------------------|
| Number of people who have completed at least one fecal immunochemical test (FIT) | 111,537                | 148,466               | 154,831               | 160,711               |
| Participation rate                                                               | 37.9%                  | 48.9%                 | 50.0%                 | 51.1%                 |

| Agency-Funded Research Grants                                                                         | Researcher               | Award Period | Total Amount Awarded | 2016/17 Amount Awarded |
|-------------------------------------------------------------------------------------------------------|--------------------------|--------------|----------------------|------------------------|
| Systematic approach to define chemical genetic interactions of HDAC inhibitors in breast cancer cells | Dr. Keith Bonham         | 2015-17      | \$200,000            | \$100,000              |
| Structure and function of p85 protein, regulator of PI3K pathway                                      | Dr. Deborah Anderson     | 2016-18      | \$200,000            | \$100,000              |
| Predicting and preventing relapses in non-hodgkin's lymphoma                                          | Dr. Mark Bosch           | 2016-18      | \$200,000            | \$100,000              |
| Exploring the cancer therapeutic relevance of protein phosphatase 2A                                  | Dr. Franco Vizeacoumar   | 2016-18      | \$200,000            | \$100,000              |
| Transgene 41BBL-engineered T cell based vaccine                                                       | Dr. Jim Xiang            | 2016-18      | \$199,474            | \$99,737               |
| Systematic identification of therapeutically relevant cancer targets (PDF salary award)               | Dr. Sreejit Parameswaran | 2016-17      | \$43,000             | \$43,000               |

## Financial Summary

In 2016-17 the Saskatchewan Cancer Agency's Operating Fund received revenues of \$165.10 million and incurred operating expenses of \$164.36 million resulting in an excess of operating revenues over expenses of \$0.74 million. The positive financial position was mainly the result of savings related to timing of implementation of new drug programs, as well as higher than anticipated drug rebates. As noted in the chart below, 88.9 per cent of the Cancer Agency's expenditures in 2016-17 were on salaries, benefits, medical tests and drugs.

In 2016-17, the Cancer Agency funded five new drug programs (pembrolizumab, ponatinib, idelalisib, ramucirumab, nivolumab) and two new indications for existing drugs (dabrafenib+trametinib combination and lenalidomide). All new drugs and indications were reviewed and recommended by the pan-Canadian Oncology Drug Review (pCODR). These drugs/indications were then negotiated at the pan-Canadian Pharmaceutical Alliance (pCPA), resulting in savings in drug costs. In addition, due to intense negotiations by the Cancer Agency for drugs that are now generic or soon to have competition from generic drugs, the drug rebates for 2016-17 were higher than anticipated. The cost sustainability strategy of national buying and negotiations is expected to continue in future years.



Patients are continuing to live longer today with cancer, which provides an opportunity for the Cancer Agency to look at how it manages increased staff workloads, expansion of services and need for space to provide care at our two cancer centres. In 2016-17, the Cancer Agency began a renovation of the third floor of the Saskatoon Cancer Centre. This space, formerly occupied by the research department until their move to the University of Saskatchewan, will be utilized mainly for patient chemotherapy treatments. The new space will improve patient flow and increase the number of chemotherapy chairs for patients. Also in 2016-17, phase two of the renovation at University Heights in Saskatoon began. This renovation brings the Screening Program for Breast Cancer into University Heights and results in having all of the Agency's early detection programs in Saskatoon in one facility, which is beneficial for clients. These two renovations will both be completed in the first quarter of 2017-18. Additional formal space planning for the cancer centres for the next five years will be undertaken in 2017-18.

Advances in cancer treatments and technology continue to emerge, which creates a need to acquire new equipment. The annual planning process for capital equipment helps us to identify the highest priority areas for allocation of capital funding and to communicate funding needs to the Ministry of Health. In 2016-17, a five-year capital plan was created which will be updated annually and used for planning purposes. This will allow us to more effectively communicate our longer-term capital equipment needs to the Ministry of Health and other stakeholders on a regular basis.

In 2016-17, we finalized the renovations necessary to allow a high energy linear accelerator treatment machine to be installed at the Allan Blair Cancer Centre and began treating patients late in the 2016-17 fiscal year on the new machine. As well, we received funding from the Ministry of Health for the next scheduled linear accelerator replacement, which will be in Saskatoon in 2017-18.

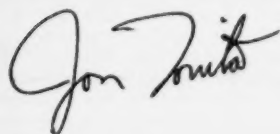
# Management Report

The accompanying financial statements are the responsibility of management and are approved by the Saskatchewan Cancer Agency Board of Directors. The financial statements have been prepared in accordance with Canadian Public Sector Accounting Standards for Not-for-Profit Organizations and the Financial Reporting Guide issued by the Ministry of Health, and of necessity include amounts based on estimates and judgments. The financial information presented in the annual report is consistent with the financial statements.

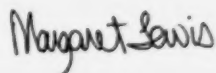
Management maintains appropriate systems of internal control, including policies and procedures, which provide reasonable assurance that the Cancer Agency's assets are safeguarded and the financial records are relevant and reliable.

The Saskatchewan Cancer Agency Board of Directors delegates the responsibility of reviewing the financial statements and overseeing management's performance in financial reporting to the Audit Committee of the board. The Audit Committee meets with management to discuss and review financial matters and recommends the financial statements to the Cancer Agency for approval. The Cancer Agency approves the annual report and, with the recommendation of the Audit Committee, approves the financial statements.

The appointed auditor conducts an independent audit of the financial statements and has full and open access to the Audit Committee. The auditor's report expresses an opinion on the fairness of the financial statements prepared by management.



Dr. Jon Tonita  
Interim President and Chief Executive Officer



Margaret Lewis  
Chief Financial Officer

May 16, 2017

# Independent Auditor's Report



PROVINCIAL AUDITOR  
of Saskatchewan

## INDEPENDENT AUDITOR'S REPORT

To: The Members of the Legislative Assembly of Saskatchewan

I have audited the accompanying financial statements of the Saskatchewan Cancer Agency, which comprise the statement of financial position as at March 31, 2017, and the statement of operations, statement of changes in fund balances and statement of cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

### *Management's Responsibility for the Financial Statements*

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian public sector accounting standards for government not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

### *Auditor's Responsibility*

My responsibility is to express an opinion on these financial statements based on my audit. I conducted my audit in accordance with Canadian generally accepted auditing standards. Those standards require that I comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

### *Opinion*

In my opinion, the financial statements present fairly, in all material respects, the financial position of the Saskatchewan Cancer Agency as at March 31, 2017, and the results of its operations and cash flows for the year then ended in accordance with Canadian public sector accounting standards for government not-for-profit organizations.

Judy Ferguson, FCPA, FCA  
Provincial Auditor

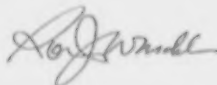
Regina, Saskatchewan  
May 16, 2017

# 2016-17 Financial Statements

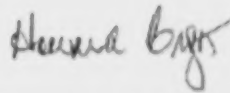
## Statement 1

### SASKATCHEWAN CANCER AGENCY STATEMENT OF FINANCIAL POSITION As at March 31

|                                              | Operating<br>Fund    | Capital<br>Fund      | Restricted Funds<br>Research<br>Fund | Trust<br>Fund       | Total<br>2017<br>(Note 15) | Total<br>2016<br>(Note 15) |
|----------------------------------------------|----------------------|----------------------|--------------------------------------|---------------------|----------------------------|----------------------------|
| <b>ASSETS</b>                                |                      |                      |                                      |                     |                            |                            |
| Current Assets                               |                      |                      |                                      |                     |                            |                            |
| Cash and short-term investments (Schedule 1) | \$ 4,696,227         | \$ 10,020,063        | \$ 1,117,406                         | \$ 4,973,113        | \$ 20,806,809              | \$ 16,539,881              |
| Accounts receivable                          |                      |                      |                                      |                     |                            |                            |
| - Ministry of Health - General Revenue Fund  | 287,500              | ---                  | ---                                  | ---                 | 287,500                    | 477,607                    |
| - Other                                      | 5,398,310            | ---                  | ---                                  | 13,609              | 5,411,919                  | 3,882,036                  |
| Inventory                                    | 7,028,359            | ---                  | ---                                  | ---                 | 7,028,359                  | 6,797,507                  |
| Prepaid expenses                             | 1,227,266            | ---                  | 32,250                               | ---                 | 1,259,516                  | 522,588                    |
| Due (to) from other funds                    | 201,151              | 677,517              | ---                                  | (878,668)           | ---                        | ---                        |
|                                              | <u>18,838,813</u>    | <u>10,697,580</u>    | <u>1,149,656</u>                     | <u>4,108,054</u>    | <u>34,794,103</u>          | <u>28,219,619</u>          |
| Investments (Schedule 1)                     | ---                  | ---                  | ---                                  | 1,420,001           | 1,420,001                  | 4,327,598                  |
| Tangible capital assets (Note 4)             | ---                  | 23,941,734           | ---                                  | ---                 | 23,941,734                 | 22,303,763                 |
| Total Assets                                 | <u>\$ 18,838,813</u> | <u>\$ 34,639,314</u> | <u>\$ 1,149,656</u>                  | <u>\$ 5,528,055</u> | <u>\$ 60,155,838</u>       | <u>\$ 54,850,980</u>       |
| <b>LIABILITIES &amp; FUND BALANCE</b>        |                      |                      |                                      |                     |                            |                            |
| Current Liabilities                          |                      |                      |                                      |                     |                            |                            |
| Accounts payable                             | \$ 6,026,596         | \$ 1,146,130         | \$ ---                               | \$ 53,663           | \$ 7,226,389               | \$ 6,268,613               |
| Accrued salaries (Note 13)                   | 2,065,655            | ---                  | ---                                  | ---                 | 2,065,655                  | 3,131,495                  |
| Vacation payable                             | 1,485,092            | ---                  | ---                                  | 2,390               | 1,487,482                  | 1,561,596                  |
| Deferred revenue (Note 7)                    | 4,164,389            | ---                  | ---                                  | ---                 | 4,164,389                  | 268,437                    |
|                                              | <u>13,741,732</u>    | <u>1,146,130</u>     | <u>---</u>                           | <u>56,053</u>       | <u>14,943,915</u>          | <u>11,230,141</u>          |
| Long-Term Liabilities                        |                      |                      |                                      |                     |                            |                            |
| Employee future benefits (Note 9)            | 2,501,500            | ---                  | ---                                  | ---                 | 2,501,500                  | 2,412,900                  |
| Total Liabilities                            | <u>16,243,232</u>    | <u>1,146,130</u>     | <u>---</u>                           | <u>56,053</u>       | <u>17,445,415</u>          | <u>13,643,041</u>          |
| Fund Balances                                |                      |                      |                                      |                     |                            |                            |
| Invested in tangible capital assets          | ---                  | 23,941,734           | ---                                  | ---                 | 23,941,734                 | 22,303,763                 |
| Externally restricted (Schedule 2)           | ---                  | 4,001,696            | 1,149,656                            | 3,232,131           | 8,383,483                  | 6,818,714                  |
| Internally restricted (Schedule 3)           | ---                  | 5,549,754            | ---                                  | 2,239,871           | 7,789,625                  | 8,231,465                  |
| Unrestricted                                 | 2,595,581            | ---                  | ---                                  | ---                 | 2,595,581                  | 3,853,997                  |
| Fund balances                                | <u>2,595,581</u>     | <u>33,493,184</u>    | <u>1,149,656</u>                     | <u>5,472,002</u>    | <u>42,710,423</u>          | <u>41,207,939</u>          |
| Total Liabilities & Fund Balance             | <u>\$ 18,838,813</u> | <u>\$ 34,639,314</u> | <u>\$ 1,149,656</u>                  | <u>\$ 5,528,055</u> | <u>\$ 60,155,838</u>       | <u>\$ 54,850,980</u>       |
| Contractual Obligations (Note 5)             |                      |                      |                                      |                     |                            |                            |



Ron Waschuk  
Board Chair  
Saskatchewan Cancer Agency



Howard Crofts, FCPA FCA  
Audit Committee Chair  
Saskatchewan Cancer Agency

(The accompanying notes and schedules are part of these financial statements.)

# 2016-17 Financial Statements

## Statement 2

### SASKATCHEWAN CANCER AGENCY STATEMENT OF OPERATIONS For the Year Ended March 31

|                                                    | Operating<br>Fund<br>2017 | Capital<br>Fund<br>2017 | Research<br>Fund<br>2017 | Trust<br>Fund<br>2017 | Total<br>2017       | Total<br>2016         |
|----------------------------------------------------|---------------------------|-------------------------|--------------------------|-----------------------|---------------------|-----------------------|
| <b>REVENUES</b>                                    |                           |                         |                          |                       |                     |                       |
| Ministry of Health – General Revenue Fund          | \$ 161,851,001            | \$ 4,315,000            | \$ —                     | \$ —                  | \$ 166,166,001      | \$ 161,277,129        |
| Grants                                             | 1,048,385                 | —                       | —                        | —                     | 1,048,385           | 837,471               |
| Donations and bequests                             | —                         | —                       | —                        | 2,433,999             | 2,433,999           | 1,613,899             |
| Investment income                                  | 96,072                    | 74,602                  | 4,361                    | 56,537                | 231,572             | 313,311               |
| Other revenues                                     | 2,106,344                 | —                       | —                        | —                     | 2,106,344           | 2,321,456             |
|                                                    | <u>165,101,802</u>        | <u>4,389,602</u>        | <u>4,361</u>             | <u>2,490,536</u>      | <u>171,986,301</u>  | <u>166,363,266</u>    |
| <b>EXPENSES</b>                                    |                           |                         |                          |                       |                     |                       |
| Salaries and employee benefits                     | 88,028,876                | —                       | —                        | 305,002               | 88,333,878          | 84,951,909            |
| Drugs and medical supplies                         | 55,517,944                | —                       | —                        | —                     | 55,517,944          | 59,530,211            |
| Purchased services                                 | 2,515,651                 | —                       | —                        | —                     | 2,515,651           | 2,272,645             |
| Other expenses                                     | 18,297,747                | —                       | —                        | 675,098               | 18,972,845          | 16,826,839            |
| Research grants (Schedule 4)                       | —                         | —                       | 533,820                  | —                     | 533,820             | 419,737               |
| Amortization                                       | —                         | 4,542,267               | —                        | —                     | 4,542,267           | 4,775,021             |
| Loss/(gain) on disposal of tangible capital assets | —                         | 67,412                  | —                        | —                     | 67,412              | 165,606               |
|                                                    | <u>164,360,218</u>        | <u>4,609,679</u>        | <u>533,820</u>           | <u>980,100</u>        | <u>170,483,817</u>  | <u>168,941,968</u>    |
| Excess (deficiency) of revenues over expenses      | <u>\$ 741,584</u>         | <u>\$ (220,077)</u>     | <u>\$ (529,459)</u>      | <u>\$ 1,510,436</u>   | <u>\$ 1,502,484</u> | <u>\$ (2,578,702)</u> |

(The accompanying notes and schedules are part of these financial statements.)

# 2016-17 Financial Statements

## Statement 3

### SASKATCHEWAN CANCER AGENCY STATEMENT OF CHANGES IN FUND BALANCES For the Year Ended March 31

| 2017                                          | Operating Fund | Capital Fund  | Research Fund | Trust Fund   | Total         |
|-----------------------------------------------|----------------|---------------|---------------|--------------|---------------|
| Fund balance, beginning of year               | \$ 3,853,997   | \$ 31,134,733 | \$ 648,878    | \$ 5,570,331 | \$ 41,207,939 |
| Excess (deficiency) of revenues over expenses | 741,584        | (220,077)     | (529,459)     | 1,510,436    | 1,502,484     |
| Interfund transfers (Note 8)                  | (2,000,000)    | 2,578,528     | 1,030,237     | (1,608,765)  | ---           |
| Fund balance, end of year                     | \$ 2,595,581   | \$ 33,493,184 | \$ 1,149,656  | \$ 5,472,002 | \$ 42,710,423 |

| 2016                                          | Operating Fund | Capital Fund  | Research Fund | Trust Fund   | Total         |
|-----------------------------------------------|----------------|---------------|---------------|--------------|---------------|
| Fund balance, beginning of year               | \$ 2,299,428   | \$ 35,258,896 | \$ 597,094    | \$ 5,631,223 | \$ 43,786,641 |
| Excess (deficiency) of revenues over expenses | 1,554,569      | (4,778,158)   | (414,953)     | 1,059,840    | (2,578,702)   |
| Interfund transfers (Note 8)                  | ---            | 653,995       | 466,737       | (1,120,732)  | ---           |
| Fund balance, end of year                     | \$ 3,853,997   | \$ 31,134,733 | \$ 648,878    | \$ 5,570,331 | \$ 41,207,939 |

(The accompanying notes and schedules are part of these financial statements.)

## 2016-17 Financial Statements

## Statement 4

**SASKATCHEWAN CANCER AGENCY  
STATEMENT OF CASH FLOWS  
For the Year Ended March 31**

|                                                                            | Operating Fund      |                     | Restricted Funds        |                          |                       |                      |                      |
|----------------------------------------------------------------------------|---------------------|---------------------|-------------------------|--------------------------|-----------------------|----------------------|----------------------|
|                                                                            | Total<br>2017       | Total<br>2016       | Capital<br>Fund<br>2017 | Research<br>Fund<br>2017 | Trust<br>Fund<br>2017 | Total<br>2017        | Total<br>2016        |
| Cash provided by (used in):                                                |                     |                     |                         |                          |                       |                      |                      |
| Operating activities:                                                      |                     |                     |                         |                          |                       |                      |                      |
| Excess (deficiency) of revenues over expenses                              | \$ 741,584          | \$ 1,554,569        | \$ (220,077)            | \$ (529,459)             | \$ 1,510,436          | \$ 760,900           | \$ (4,133,271)       |
| Net change in non-cash working capital (Note 3)                            | 897,526             | (1,727,846)         | 532,436                 | (32,250)                 | 111,704               | 611,890              | (1,705,392)          |
| Amortization of tangible capital assets                                    | ---                 | ---                 | 4,542,267               | ---                      | ---                   | 4,542,267            | 4,775,021            |
| Loss on disposal of tangible capital assets                                | ---                 | ---                 | 67,412                  | ---                      | ---                   | 67,412               | 165,606              |
|                                                                            | <u>1,639,110</u>    | <u>(173,277)</u>    | <u>4,922,038</u>        | <u>(561,709)</u>         | <u>1,622,140</u>      | <u>5,982,469</u>     | <u>(898,036)</u>     |
| Capital activities:                                                        |                     |                     |                         |                          |                       |                      |                      |
| Purchase of tangible capital assets                                        |                     |                     |                         |                          |                       |                      |                      |
| Building/construction/land                                                 | ---                 | ---                 | (770,119)               | ---                      | ---                   | (770,119)            | (4,000)              |
| Leasehold improvements                                                     | ---                 | ---                 | (898,943)               | ---                      | ---                   | (898,943)            | (1,228,751)          |
| Equipment                                                                  | ---                 | ---                 | (4,578,588)             | ---                      | ---                   | (4,578,588)          | (1,491,472)          |
|                                                                            | <u>---</u>          | <u>---</u>          | <u>(6,247,650)</u>      | <u>---</u>               | <u>---</u>            | <u>(6,247,650)</u>   | <u>(2,724,223)</u>   |
| Investing activities:                                                      |                     |                     |                         |                          |                       |                      |                      |
| Purchase of investments                                                    | ---                 | ---                 | ---                     | ---                      | (500,000)             | (500,000)            | (470,000)            |
| Disposal of investments                                                    | 2,000,000           | 1,000,000           | 893,000                 | ---                      | 500,000               | 1,393,000            | 970,000              |
|                                                                            | <u>2,000,000</u>    | <u>1,000,000</u>    | <u>893,000</u>          | <u>---</u>               | <u>---</u>            | <u>893,000</u>       | <u>500,000</u>       |
| Net increase (decrease) in cash and short-term investments during the year | 3,639,110           | 826,723             | (432,612)               | (561,709)                | 1,622,140             | 627,819              | (3,122,259)          |
| Cash and short-term investments, beginning of year                         | 3,057,117           | 2,230,395           | 7,874,147               | 648,878                  | 4,959,738             | 13,482,763           | 16,605,022           |
| Interfund transfers (Note 8)                                               | (2,000,000)         | ---                 | 2,578,528               | 1,030,237                | (1,608,765)           | 2,000,000            | ---                  |
| Cash and short-term investments, end of year                               | <u>\$ 4,696,227</u> | <u>\$ 3,057,118</u> | <u>\$ 10,020,063</u>    | <u>\$ 1,117,406</u>      | <u>\$ 4,973,113</u>   | <u>\$ 16,110,582</u> | <u>\$ 13,482,763</u> |
| Amounts in cash balances:                                                  |                     |                     |                         |                          |                       |                      |                      |
| Cash and short-term investments                                            | <u>\$ 4,696,227</u> | <u>\$ 3,057,118</u> | <u>\$ 10,020,063</u>    | <u>\$ 1,117,406</u>      | <u>\$ 4,973,113</u>   | <u>\$ 16,110,582</u> | <u>\$ 13,482,763</u> |

(The accompanying notes and schedules are part of these financial statements.)

## 2016-17 Financial Statements

### **SASKATCHEWAN CANCER AGENCY NOTES TO THE FINANCIAL STATEMENTS As at March 31, 2017**

#### **1. Legislative Authority**

The Saskatchewan Cancer Foundation commenced operations on August 1, 1979 under the provisions of *The Cancer Foundation Act*. Effective January 2, 2007, it continued as a corporation under the name of the Saskatchewan Cancer Agency (Cancer Agency), pursuant to *The Cancer Agency Act*. The Cancer Agency is responsible for the planning, organization, delivery and evaluation of cancer care services throughout Saskatchewan in collaboration with Saskatchewan regional health authorities and health care organizations.

The Cancer Agency is a not-for-profit organization and is not subject to income and property taxes from the federal, provincial and municipal levels of government.

#### **2. Significant Accounting Policies**

The Cancer Agency is classified as a government not-for-profit organization. These financial statements have been prepared in accordance with Canadian public sector accounting (PSA) standards, issued by the Public Sector Accounting Board and published by the Chartered Professional Accountants of Canada (CPA Canada). The Cancer Agency has adopted the standards for government not-for-profit organizations, as set forth at PSA Handbook Section PS 4200 to PS 4270.

##### **a) Fund Accounting**

The accounts of the Cancer Agency are maintained in accordance with the restricted fund method of accounting. For financial reporting purposes, accounts with similar characteristics have been combined into the following major funds:

##### **i) Operating Fund**

The Operating Fund reflects the primary operations of the Cancer Agency including contributions from the Ministry of Health - General Revenue Fund for the provision of health services. Other revenues consist of recoveries, ancillary revenue and billings to patients and other organizations.

##### **ii) Capital Fund**

The Capital Fund is a restricted fund that reflects the equity of the Cancer Agency in tangible capital assets. The Capital Fund includes contributions from the Ministry of Health - General Revenue Fund designated for construction of capital projects and the acquisition of capital equipment. Expenses consist primarily of amortization of tangible capital assets.

##### **iii) Research Fund**

The Research Fund is a restricted fund that supports the awarding of cancer research grants. The Research Fund includes contributions from research donations transferred from the Trust Fund and investment income of the Research Fund.

##### **iv) Trust Fund**

The Trust Fund is a restricted fund that accepts donations and contributions designated by the contributors to be used for such purposes as cancer research, equipment and library books. The Cancer Agency maintains a record of the funds contributed and spent for each of the designated purposes until such funds are fully utilized. Trust funds are managed under four principles – Transparency, Accountability, Stewardship and Controls on Authorization.

##### **b) Revenue**

Unrestricted contributions are recognized as revenue in the Operating Fund in the year received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

## 2016-17 Financial Statements

Restricted contributions related to general operations are recorded as deferred revenue and recognized as revenue of the Operating Fund in the year in which the related expenses are incurred. All other restricted contributions are recognized in the year as revenue of the appropriate restricted fund received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

### c) Investments

Long-term investments are recorded at par value plus or minus the amortization of premium or discount remaining in the life of the bond. Short-term investments are recorded at fair value.

### d) Inventory

Inventory consists of chemotherapy drugs valued at cost as determined using the average cost method.

### e) Tangible Capital Assets

Tangible capital assets are recorded at cost. Normal maintenance and repairs are expensed as incurred. Tangible capital assets, with a life exceeding one year, are amortized on a straight-line basis over their estimated useful lives as follows:

|                         |            |
|-------------------------|------------|
| Buildings               | 20 years   |
| Leasehold improvements  | 3-20 years |
| Equipment and furniture | 4-15 years |

Donated tangible capital assets are recorded at their fair value at the date of contribution if readily determinable, otherwise they are recorded at nominal value.

### f) Employee Future Benefits

#### i) Pension plan:

Employees of the Cancer Agency participate in a multi-employer defined benefit pension plan or a multi-employer defined contribution plan. The Cancer Agency follows defined contribution plan accounting for its participation in these plans. Accordingly, the Cancer Agency expenses all contributions it is required to make in the year.

#### ii) Disability income plan:

Out-of-scope employees of the Cancer Agency participate in a disability income plan to provide wage-loss insurance due to a disability. The Cancer Agency follows post-employment benefits accounting for its participation in the plans. Accordingly, the Cancer Agency expenses all contributions it is required to make in the year. In-scope employees of the Cancer Agency also participate in a disability income plan to provide wage-loss insurance due to a disability. This plan is administered through the Saskatchewan Government and General Employees' Union and the Cancer Agency has no financial obligation for the plan.

#### iii) Accumulated sick leave benefit liability:

The Cancer Agency provides sick leave benefits for employees that accumulate but do not vest. The Cancer Agency recognizes a liability and an expense for sick leave in the period in which employees render services in return for the benefits. The liability and expense is developed using an actuarial cost method.

### g) Measurement Uncertainty

These financial statements have been prepared by management in accordance with Canadian generally accepted accounting principles. In the preparation of financial statements, management makes various estimates and assumptions in determining the reported amounts of assets and liabilities, revenues and expenses, and in the disclosure of commitments and contingencies. Changes in estimates and assumptions will occur based on the passage of time and the occurrence of certain future events. The changes will be reported in the period in which they become known. Significant items subject to such estimates and assumptions include the accrual of payroll and benefit costs and accrual of costs for services provided by regional health authorities.

## 2016-17 Financial Statements

### h) Financial Instruments

Cash, short-term investments, accounts receivable, accounts payable, accrued salaries and vacation payable are classified in the fair value category. Gains and losses on these financial instruments are recognized in the Statement of Operations.

Financial assets in the fair value category are marked-to-market by reference to their quoted bid price.

Long-term investments are valued at par value plus or minus the amortization of premium or discount remaining in the life of the bond. Sales and purchases of investments are recorded on the trade date. Investments consist of guaranteed investment certificates, term deposits, bonds and debentures. Transaction costs related to the acquisition of investments are expensed.

As at March 31, 2017, the Cancer Agency does not have any outstanding contracts or financial instruments with embedded derivatives (2016 – none). Financial assets are categorized as level 1 in the fair value hierarchy.

### 3. Net Change in Non-Cash Working Capital

|                                                  | Operating Fund    |                       | Restricted Funds  |                    |                   |                   |                       |
|--------------------------------------------------|-------------------|-----------------------|-------------------|--------------------|-------------------|-------------------|-----------------------|
|                                                  | 2017              | 2016                  | Capital Fund      | Research Fund      | Trust Fund        | Total 2017        | Total 2016            |
| (Increase) decrease in accounts receivable       | \$ (1,339,712)    | \$ (1,089,773)        | \$ 7,344          | \$ —               | \$ (7,408)        | \$ (64)           | \$ 31,579             |
| (Increase) in inventory                          | (230,852)         | (206,406)             | —                 | —                  | —                 | —                 | —                     |
| (Increase) decrease in prepaid expenses          | (704,678)         | 317,284               | —                 | (32,250)           | —                 | (32,250)          | 63,000                |
| (Increase) decrease in due (to) from other funds | 199,937           | (132,336)             | (306,715)         | —                  | 106,777           | (199,938)         | 132,337               |
| Decrease in financial instruments                | 805               | 1,610                 | 11,292            | —                  | 2,500             | 13,792            | 22,888                |
| Increase (decrease) in accounts payable          | 126,876           | 1,586,435             | 820,515           | —                  | 10,388            | 830,903           | (1,956,672)           |
| Increase (decrease) in accrued salaries          | (1,065,840)       | 622,155               | —                 | —                  | —                 | —                 | —                     |
| Increase (decrease) in vacation payable          | (73,562)          | 79,512                | —                 | —                  | (553)             | (553)             | 1,476                 |
| Increase (decrease) in deferred revenue          | 3,895,952         | (3,028,127)           | —                 | —                  | —                 | —                 | —                     |
| Increase in employee future benefits             | 88,600            | 121,800               | —                 | —                  | —                 | —                 | —                     |
|                                                  | <u>\$ 897,526</u> | <u>\$ (1,727,846)</u> | <u>\$ 532,436</u> | <u>\$ (32,250)</u> | <u>\$ 111,704</u> | <u>\$ 611,890</u> | <u>\$ (1,705,392)</u> |

### 4. Tangible Capital Assets

|                         | March 31, 2017       |                          |                      | March 31, 2016       |  |
|-------------------------|----------------------|--------------------------|----------------------|----------------------|--|
|                         | Cost                 | Accumulated Amortization | Net Book Value       | Net Book Value       |  |
| Land and Improvements   | \$ 280,297           | \$ —                     | \$ 280,297           | \$ 280,297           |  |
| Buildings               | 24,762,559           | 20,786,048               | 3,976,511            | 3,543,732            |  |
| Leasehold Improvements  | 19,049,697           | 12,673,381               | 6,376,316            | 6,484,280            |  |
| Equipment and Furniture | 44,550,342           | 31,241,732               | 13,308,610           | 11,995,454           |  |
|                         | <u>\$ 88,642,895</u> | <u>\$ 64,701,161</u>     | <u>\$ 23,941,734</u> | <u>\$ 22,303,763</u> |  |

Work in progress amount included in the assets above is \$1,649,585 (2016 - \$1,190,378). This amount was not amortized in 2016/17.

**5. Contractual Obligations****a) Tangible Capital Asset Acquisitions**

At March 31, 2017, contractual obligations for acquisition of tangible capital assets are \$587,294 (2016 - \$3,181,143).

**b) Operating Leases**

Minimum annual payments under operating leases on property over the next five years are as follows:

|      |              |
|------|--------------|
| 2018 | \$ 1,914,072 |
| 2019 | 1,799,157    |
| 2020 | 1,740,095    |
| 2021 | 1,767,074    |
| 2022 | 1,769,591    |

**c) Contracted Health Services Operators**

The Cancer Agency continues to contract on an ongoing basis with the regional health authorities to provide some services such as lab tests, diagnostic radiology, housekeeping and maintenance services. Services provided in the year ending March 31, 2017 will continue to be contracted for the following fiscal year and should not be affected in a significant way by the transition to a single provincial health authority. In the year ending March 31, 2017, the Cancer Agency contracted services amounting to \$7,736,298 (2016 - \$7,761,079). Note 10 provides supplementary information on the regional health authorities.

**6. Cancer Patient Lodges**

The Canadian Cancer Society, Saskatchewan Division (Society), previously donated two cancer patient lodges in the Province to the Cancer Agency. Under the terms of an agreement with the Society, the Cancer Agency has assumed responsibility for the operations of these lodges. Title to the properties will remain with the Cancer Agency so long as they are operated as cancer patient lodges. If the Cancer Agency ceases to use the buildings as patient lodges, title of those buildings will be transferred to the Society without charge.

**7. Deferred Revenue**

|                                                     | Balance<br>Beginning<br>of Year | Less<br>Amount<br>Recognized | Add<br>Amount<br>Received | Balance<br>End of<br>Year |
|-----------------------------------------------------|---------------------------------|------------------------------|---------------------------|---------------------------|
| As at March 31, 2017                                |                                 |                              |                           |                           |
| <b>Ministry of Health Initiatives</b>               |                                 |                              |                           |                           |
| Ministry of Health - General Revenue Fund           |                                 |                              |                           |                           |
| - Aboriginal awareness training                     | \$ 1,000                        | \$ ---                       | \$ ---                    | \$ 1,000                  |
| - Lymphedema education                              | 2,849                           | ---                          | ---                       | 2,849                     |
| - Drug contingency                                  | ---                             | ---                          | 4,000,000                 | 4,000,000                 |
| <b>Total Ministry of Health</b>                     | <b>3,849</b>                    | <b>---</b>                   | <b>4,000,000</b>          | <b>4,003,849</b>          |
| <b>Other Government of Saskatchewan Initiatives</b> |                                 |                              |                           |                           |
| 3sHealth - Smart Pump Program                       | \$ 127,896                      | \$ 53,084                    | \$ ---                    | \$ 74,812                 |
| <b>Total Other Government of Saskatchewan</b>       | <b>127,896</b>                  | <b>53,084</b>                | <b>---</b>                | <b>74,812</b>             |
| <b>Non-Government of Saskatchewan Initiatives</b>   |                                 |                              |                           |                           |
| Other revenue received in advance                   | \$ 136,692                      | \$ 80,530                    | \$ 29,566                 | \$ 85,728                 |
| <b>Total Non-Government of Saskatchewan</b>         | <b>136,692</b>                  | <b>80,530</b>                | <b>29,566</b>             | <b>85,728</b>             |
| <b>Total Deferred Revenue</b>                       | <b>\$ 268,437</b>               | <b>\$ 133,614</b>            | <b>\$ 4,029,566</b>       | <b>\$ 4,164,389</b>       |

## 2016-17 Financial Statements

### 8. Interfund Transfers

Each year the Cancer Agency transfers amounts between its funds for various purposes. These include funding current and future tangible capital asset purchases and research grants and reassigning fund balances to support certain activities.

| 2017                             |                       |                     |                     |                       |
|----------------------------------|-----------------------|---------------------|---------------------|-----------------------|
|                                  | Operating Fund        | Capital Fund        | Research Fund       | Trust Fund            |
| Tangible capital asset purchases | \$ (1,500,000)        | \$ 2,578,528        | \$ —                | \$ (1,078,528)        |
| Research grants                  | (500,000)             | —                   | 1,030,237           | (530,237)             |
| <b>Total</b>                     | <b>\$ (2,000,000)</b> | <b>\$ 2,578,528</b> | <b>\$ 1,030,237</b> | <b>\$ (1,608,765)</b> |

| 2016                             |                |                   |                   |                       |
|----------------------------------|----------------|-------------------|-------------------|-----------------------|
|                                  | Operating Fund | Capital Fund      | Research Fund     | Trust Fund            |
| Tangible capital asset purchases | \$ —           | \$ 653,995        | \$ —              | \$ (653,995)          |
| Research grants                  | —              | —                 | 466,737           | (466,737)             |
| <b>Total</b>                     | <b>\$ —</b>    | <b>\$ 653,995</b> | <b>\$ 466,737</b> | <b>\$ (1,120,732)</b> |

### 9. Employee Future Benefits

#### a) Pension Plan

Employees of the Cancer Agency participate in one of the following pension plans:

- i) Public Employees Pension Plan (PEPP) (a related party) is a defined contribution pension plan and is the responsibility of the Government of Saskatchewan. The Cancer Agency's financial obligation to the plan is limited to making required payments to match the amount contributed by the employees for current services. Pension expense for the year is included in salaries and employee benefits in Schedule 5.
- ii) Saskatchewan Healthcare Employees' Pension Plan (SHEPP) is jointly governed by a board of eight trustees. Four of the trustees are appointed by the Health Shared Services Saskatchewan (3sHealth) (a related party) and four of the trustees are appointed by Saskatchewan's health care unions (CUPE, SUN, SEIU, SGEU, RWDSU and HSAS). SHEPP is a multi-employer defined benefit plan, which came into effect December 31, 2002. The Cancer Agency's financial obligation to the plan is limited to making required payments to match the amount contributed by the employees for current services at a ratio of 1.12 to 1. Pension plan contribution rates have increased as a result of deficiencies in SHEPP. Any actuarially determined deficiency is the responsibility of participating employers and employees in the ratio of 1.12 to 1. Contribution rates will continue to increase until the next actuarial reports are completed. Pension expense for the year is included in salaries and employee benefits in Schedule 5.

|                                                       | SHEPP          | PEPP     | 2017<br>Total | 2016<br>Total |
|-------------------------------------------------------|----------------|----------|---------------|---------------|
| Number of active members                              | 79             | 707      | 786           | 752           |
| Member contribution rate, percentage of salary        | 8.1% - 10.7%   | 7.60%    |               |               |
| Cancer Agency contribution rate, percentage of salary | 9.07% - 11.98% | 7.60%    |               |               |
| Member contributions (thousands of dollars)           | \$ 409         | \$ 3,704 | \$ 4,113      | \$ 3,818      |
| Cancer Agency contributions (thousands of dollars)    | \$ 456         | \$ 3,787 | \$ 4,243      | \$ 3,932      |

Note - Active members are employees of the Cancer Agency, including those on leave of absence as of March 31, 2017. Inactive members are not reported by the Agency.

## 2016-17 Financial Statements

### b) Disability Income Plans

Employees of the Cancer Agency participate in the following disability income plans:

**PEBA** – Disability income plan for out-of-scope staff, administered by the Public Employees Benefits Agency. The Cancer Agency's financial obligation to this plan is limited to making the required payments to the plan according to the applicable agreement. Disability expense for the PEBA plan is included in salaries and employee benefits in Schedule 5 and is equal to the contribution amount below.

**SGEU** – Disability income plan for in-scope staff, administered by the Saskatchewan Government and General Employees' Union. The Cancer Agency has no financial obligation for this plan.

|                                                       |        |        | 2017   | 2016   |
|-------------------------------------------------------|--------|--------|--------|--------|
|                                                       | PEBA   | SGEU   | Total  | Total  |
| Number of active members                              | 146    | 677    | 823    | 803    |
| Member contribution rate, percentage of salary        | 0.97%  | 1.30%  |        |        |
| Cancer Agency contribution rate, percentage of salary | 1.12%  | 0%     |        |        |
| Member contributions (thousands of dollars)           | \$ 244 | \$ 532 | \$ 776 | \$ 675 |
| Cancer Agency contributions (thousands of dollars)    | \$ 274 | \$ —   | \$ 274 | \$ 274 |

### c) Accumulated Sick Leave Benefit Liability

The cost of the accrued benefit obligations related to sick leave entitlement earned by employees is actuarially determined using the projected benefit method prorated on service and management's best estimate of inflation, discount rate, employee demographics and sick leave usage of active employees. The Cancer Agency has completed an actuarial valuation as of March 31, 2016 with an estimated valuation to March 31, 2018. Key assumptions used as inputs into the actuarial calculation are as follows:

|                                          | 2017  | 2016  |
|------------------------------------------|-------|-------|
| Discount rate (per annum)                | 2.50% | 2.40% |
| Percentage earnings increase (per annum) |       |       |
| For ages 15 to 29                        | 2.00% | 2.00% |
| For ages 30 to 39                        | 1.50% | 1.50% |
| For ages 40 to 49                        | 1.00% | 1.00% |
| For ages 50 to 59                        | 0.50% | 0.50% |
| For ages 60 and over                     | 0.00% | 0.00% |
| Termination rates (sample rates)         |       |       |
| Age 20                                   | 0.119 | 0.119 |
| Age 25                                   | 0.084 | 0.084 |
| Age 30                                   | 0.056 | 0.056 |
| Age 35                                   | 0.045 | 0.045 |
| Age 40                                   | 0.035 | 0.035 |
| Age 45                                   | 0.030 | 0.030 |
| Age 50                                   | 0.025 | 0.025 |
| Age 55                                   | 0.015 | 0.015 |
| Age 60                                   | 0.010 | 0.010 |

## 2016-17 Financial Statements

|                                               | 2017         | 2016         |
|-----------------------------------------------|--------------|--------------|
| Accrued benefit obligation, beginning of year | \$ 2,412,900 | \$ 2,291,100 |
| Cost for the year                             |              |              |
| Current period benefit costs                  | 350,000      | 358,400      |
| Interest expense                              | 59,700       | 48,600       |
| Actuarial (gains) losses                      | 11,000       | 21,800       |
| Benefits paid during the year                 | (332,100)    | (307,000)    |
| Accrued benefit obligation, end of year       | \$ 2,501,500 | \$ 2,412,900 |

### 10. Related Party Transactions

These financial statements include transactions with related parties. The Cancer Agency is related to all Saskatchewan Crown Agencies such as ministries, corporations, boards and commissions under the common control of the Government of Saskatchewan. The Cancer Agency is also related to non-Crown enterprises that the Government jointly controls or significantly influences.

Transactions with these related parties are in the normal course of operations. Amounts due to or from and the recorded amounts of transactions resulting from these transactions are included in the financial statements and the table below. Drugs and purchased hospital services acquired from related parties are recorded at rates agreed to by the related parties.

Other routine operating transactions with related parties are recorded at agreed upon rates charged by those organizations and are settled on normal trade terms.

|                                             | 2017                 | 2016                 |
|---------------------------------------------|----------------------|----------------------|
| <b>Expenses</b>                             |                      |                      |
| Regina Qu'Appelle Regional Health Authority | \$ 2,774,210         | \$ 2,739,751         |
| Saskatoon Regional Health Authority         | 4,076,202            | 4,389,161            |
| Public Employees Pension Plan               | 3,786,986            | 3,532,778            |
| 3sHealth                                    | 2,759,252            | 2,061,136            |
| Other related parties                       | 4,957,750            | 3,988,380            |
| Total related party expenses                | <u>\$ 18,354,400</u> | <u>\$ 16,711,206</u> |
| <b>Prepaid Expenses</b>                     |                      |                      |
| Other related parties                       | \$ 285,117           | \$ ---               |
| Total related party prepaid expenses        | <u>\$ 285,117</u>    | <u>\$ ---</u>        |
| <b>Accounts Payable</b>                     |                      |                      |
| Regina Qu'Appelle Regional Health Authority | \$ 228,026           | \$ 1,004,101         |
| Saskatoon Regional Health Authority         | 758,066              | 718,956              |
| Other related parties                       | 481,831              | 576,518              |
| Total related party payable                 | <u>\$ 1,467,923</u>  | <u>\$ 2,299,575</u>  |

In addition, the Cancer Agency pays Provincial Sales Tax to the Saskatchewan Ministry of Finance on all its taxable purchases. Taxes paid are recorded as part of the cost of those purchases.

The building premises occupied by the Allan Blair Cancer Centre are leased from the Regina Qu'Appelle Regional Health Authority for \$1 per year, including a portion of occupancy costs. The Saskatoon Cancer Centre building owned by the Cancer Agency is situated on land owned by the University of Saskatchewan. The Cancer Agency is not charged for the use of this land.

**11. Financial Instruments****a) Significant Terms and Conditions**

There are no significant terms and conditions related to financial instruments classified as current assets or current liabilities that may affect the amount, timing and certainty of future cash flows. Significant terms and conditions for other financial instruments are disclosed separately in these financial statements.

**b) Financial Risk Management**

The Board ensures that the Cancer Agency has identified its major risks and ensures that management monitors and controls them. The Board oversees the Cancer Agency's systems and practices of internal control and ensures that these controls contribute to the assessment and mitigation of risk.

The Cancer Agency has exposure to the following risk from its use of financial instruments: credit risk, market risk and liquidity risk.

**c) Credit Risk**

The Cancer Agency is exposed to credit risk from potential non-payment of accounts receivable. The majority of the Agency's receivables are from the Ministry of Health – General Revenue Fund, other government organizations or suppliers with which the Agency has ongoing contractual relations. Therefore, the credit risk on accounts receivable is minimal. The Cancer Agency is also exposed to credit risk from cash, short-term investments and investments.

The carrying amount of financial assets represents the maximum credit exposure as follows:

|                                           | 2017          | 2016          |
|-------------------------------------------|---------------|---------------|
| Cash and short-term investments           | \$ 20,806,809 | \$ 16,539,881 |
| Accounts receivable                       |               |               |
| Ministry of Health – General Revenue Fund | 287,500       | 477,607       |
| Other                                     | 5,411,919     | 3,882,036     |
| Investments                               | 1,420,001     | 4,327,598     |
|                                           | \$ 27,926,229 | \$ 25,227,122 |

The Cancer Agency manages its credit risk surrounding cash and short-term investments by dealing solely with reputable banks and financial institutions and using an investment policy to guide their investment decisions. The Cancer Agency invests surplus funds to earn investment income with the objective of maintaining safety of principal and providing adequate liquidity to meet cash flow requirements.

**d) Market Risk**

Market risk is the risk that market prices, such as foreign exchange rates or interest rates, will affect the Cancer Agency's income or the value of its holdings of financial instruments. The objective of market risk management is to control market risk exposures within acceptable parameters while optimizing return on investment.

**i) Foreign exchange risk:**

The Cancer Agency operates within Canada, but in the normal course of operations is party to transactions denominated in foreign currencies. Foreign exchange risk arises from transactions denominated in a currency other than the Canadian dollar, which is the functional currency of the Cancer Agency. The Cancer Agency believes that it is not subject to significant foreign exchange risk from its financial instruments.

**ii) Interest rate risk:**

Interest rate risk is the risk that the fair value of future cash flows or a financial instrument will fluctuate because of changes in the market interest rates.

Financial assets and financial liabilities with variable interest rates expose the Cancer Agency to cash flow interest rate risk. The Cancer Agency's investments include guaranteed investment certificates and long-term bonds bearing interest at coupon rates.

## 2016-17 Financial Statements

Although management monitors exposure to interest rate fluctuations, it does not employ any interest rate management policies to counteract interest rate fluctuations.

As of March 31, 2017, had prevailing interest rates increased or decreased by 1%, assuming a parallel shift in the yield curve, with all other variables held constant, the Cancer Agency's financial instruments would have decreased or increased by approximately \$279,262 (2016 - \$252,271), approximately 19.7% of the value of investments (2016 - 5.8%).

### iii) Liquidity risk:

Liquidity risk is the risk that the Cancer Agency will not be able to meet its financial obligations as they become due. The Cancer Agency manages liquidity risk by continually monitoring actual and forecasted cash flows from operations and from anticipated investing and financing activities. At March 31, 2017, the Cancer Agency has a cash balance of \$20,806,809 (2016 - \$16,539,881).

### iv) Fair value:

The following methods and assumptions were used to estimate the fair value of each class of financial instrument:

- The carrying amounts of these financial instruments approximate fair value due to their immediate or short-term nature.
  - Accounts receivable
  - Accounts payable
  - Accrued salaries and vacation payable
- Cash and short-term investments are recorded at fair value as disclosed in Schedule 1, determined using quoted market prices.
- Long-term investments are recorded at par value plus or minus the amortization of premium or discount remaining in the life of the bond, as disclosed in Schedule 1.

Determination of fair value:

When the carrying amount of a financial instrument is the most reasonable approximation of fair value, reference to market quotations and estimation techniques is not required. The carrying values of cash and short-term investments, accounts receivable and accounts payable approximated their fair values due to the short-term maturity of these financial instruments.

## 12. Budget

Schedule 5 compares actual results to the 2016-17 budget plan approved by the Cancer Agency's Board of Directors on July 18, 2016.

## 13. Pay for Performance

As part of government-wide fiscal restraint measures, the pay for performance compensation plan has been suspended for the fiscal years 2014-15 to 2016-17. This compensation plan was introduced in April 2011 and allowed senior employees to be eligible to earn lump sum performance adjustments of up to 110% of their base salary. In prior years, senior employees were paid 90% of current base salary and lump sum performance adjustments related to the previous year. Due to the suspension of the pay for performance compensation plan, senior employees did receive 100% of their base salary for the fiscal years 2014-15 to 2016-17.

## 14. Collective Bargaining Agreement

The Saskatchewan Government and General Employees' Union (SGEU) collective bargaining agreement expires on March 31, 2018.

## 15. Change in Accounting Policy

The Cancer Agency has changed its accounting policy for the classification of the fund balance for the operating fund retroactively to April 1, 2016. The fund balance has been changed from an internally restricted balance to an unrestricted balance. The prior year amount in Statement 1 has been restated for the effect of this change.

# 2016-17 Financial Statements

## Schedule 1

### SASKATCHEWAN CANCER AGENCY SCHEDULE OF CASH AND INVESTMENTS As at March 31, 2017

|                                             | Amortized<br>Cost    | Maturity<br>Date | Effective<br>Rate | Coupon<br>Rate |
|---------------------------------------------|----------------------|------------------|-------------------|----------------|
| <b>Restricted Investments</b>               |                      |                  |                   |                |
| Cash & short-term investments:              |                      |                  |                   |                |
| Royal Bank of Canada                        | \$ 16,110,582        | ---              | 0.75%             | ---            |
| Long-term investments:                      |                      |                  |                   |                |
| Royal Bank of Canada GIC                    | 500,000              | 10/24/18         | 1.45%             | 1.45%          |
| Bank of Nova Scotia Bond                    | 450,001              | 03/14/19         | 2.41%             | 2.46%          |
| Bank of Nova Scotia GIC                     | 470,000              | 01/15/18         | 1.75%             | 1.75%          |
|                                             | <u>1,420,001</u>     |                  |                   |                |
| Total restricted investments                | <u>\$ 17,530,583</u> |                  |                   |                |
| <b>Unrestricted Investments</b>             |                      |                  |                   |                |
| Cash & short-term investments:              |                      |                  |                   |                |
| Royal Bank of Canada                        | \$ 4,696,227         | ---              | 0.75%             | ---            |
| Long-term investments:                      | ---                  |                  |                   |                |
| Total unrestricted investments              | <u>\$ 4,696,227</u>  |                  |                   |                |
| <b>Restricted &amp; Unrestricted Totals</b> |                      |                  |                   |                |
| Total cash & short-term investments         | \$ 20,806,809        |                  |                   |                |
| Total long-term investments                 | <u>1,420,001</u>     |                  |                   |                |
| Total Investments                           | <u>\$ 22,226,810</u> |                  |                   |                |

# 2016-17 Financial Statements

## Schedule 2

### SASKATCHEWAN CANCER AGENCY SCHEDULE OF EXTERNALLY RESTRICTED FUNDS For the Year Ended March 31, 2017

| Restriction   | Balance<br>Beginning<br>of Year | Investment<br>and Other<br>Revenue | Expenses              | Transfers<br>and Other | Balance<br>End<br>of Year |
|---------------|---------------------------------|------------------------------------|-----------------------|------------------------|---------------------------|
| Capital Fund  | \$ 2,074,684                    | \$ 4,389,602                       | \$ (2,462,590)        | \$ —                   | \$ 4,001,696              |
| Research Fund | 648,878                         | 4,361                              | (533,820)             | 1,030,237              | 1,149,656                 |
| Trust Fund    | 4,095,152                       | 1,257,391                          | (611,801)             | (1,508,611)            | 3,232,131                 |
| Total         | <u>\$ 6,818,714</u>             | <u>\$ 5,651,354</u>                | <u>\$ (3,608,211)</u> | <u>\$ (478,374)</u>    | <u>\$ 8,383,483</u>       |

## Schedule 3

### SASKATCHEWAN CANCER AGENCY SCHEDULE OF INTERNALLY RESTRICTED FUNDS For the Year Ended March 31, 2017

| Restriction  | Balance<br>Beginning<br>of Year | Investment<br>and Other<br>Revenue | Expenses              | Transfers<br>and Other | Balance<br>End<br>of Year |
|--------------|---------------------------------|------------------------------------|-----------------------|------------------------|---------------------------|
| Capital Fund | \$ 6,756,286                    | \$ —                               | \$ (2,706,532)        | \$ 1,500,000           | \$ 5,549,754              |
| Trust Fund   | 1,475,179                       | 1,233,145                          | (368,299)             | (100,154)              | 2,239,871                 |
| Total        | <u>\$ 8,231,465</u>             | <u>\$ 1,233,145</u>                | <u>\$ (3,074,831)</u> | <u>\$ 1,399,846</u>    | <u>\$ 7,789,625</u>       |

# 2016-17 Financial Statements

## Schedule 4

### SASKATCHEWAN CANCER AGENCY SCHEDULE OF RESEARCH GRANTS For the Year Ended March 31, 2017

|                                                                                                                                                                                                                                               | 2017              | 2016              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------------------|
| Structure and function of p85 protein, regulator of the P13K pathway .....                                                                                                                                                                    | 100,000           | —                 |
| Predicting and preventing relapses in non-Hodgkin's lymphoma .....                                                                                                                                                                            | 100,000           | —                 |
| Exploring the cancer therapeutic relevance of protein phosphatase 2A .....                                                                                                                                                                    | 100,000           | —                 |
| Transgene 41BBL-engineered T cell based vaccine stimulates potent therapeutic immunity against<br>HER2-positive tumor in double transgenic HLA-A2/HER2 mice and trastuzumab-resistant BT474 breast<br>cancer in humanized DKO/hHsc mice ..... | 99,737            | —                 |
| Systematic identification of therapeutically relevant targets for cancer .....                                                                                                                                                                | 10,750            | —                 |
| Exploiting the synthetic dosage lethal interactions of polo-like kinase 1 for triple negative breast cancer<br>therapeutics .....                                                                                                             | 23,333            | 20,000            |
| Systematic approach to define chemical genetic interactions of HDAC inhibitors in breast cancer cells .....                                                                                                                                   | 100,000           | 100,000           |
| Regulation of PTEN in Breast Cancer Cells .....                                                                                                                                                                                               | —                 | 100,000           |
| Exploiting the Defective Genome of Cancer Cells by Synthetic Lethality .....                                                                                                                                                                  | —                 | 100,000           |
| Novel HER2-specific T Cell-Based Vaccine Expressing Potent Th Epitope P30 for Enhanced<br>Therapeutic Immunity Against Trastuzumab-Resistant HER2-positive Breast Cancer .....                                                                | —                 | 99,737            |
| Total Grants                                                                                                                                                                                                                                  | <u>\$ 533,820</u> | <u>\$ 419,737</u> |
| <u>Breakdown</u>                                                                                                                                                                                                                              |                   |                   |
| Operating expense                                                                                                                                                                                                                             | <u>\$ 533,820</u> | <u>\$ 419,737</u> |

# 2016-17 Financial Statements

## Schedule 5

### SASKATCHEWAN CANCER AGENCY COMPARISON OF ACTUAL TO BUDGET For the Year Ended March 31, 2017

|                                           | Operating Fund        |                     |
|-------------------------------------------|-----------------------|---------------------|
|                                           | Actual                | Budget<br>(Note 12) |
| <b>REVENUES</b>                           |                       |                     |
| Ministry of Health - General Revenue Fund | \$ 161,851,001        | \$ 168,240,000      |
| Grants                                    | 1,048,385             | 710,000             |
| Investment income                         | 96,072                | 50,000              |
| Other revenues                            | 2,106,344             | 2,132,630           |
|                                           | <u>165,101,802</u>    | <u>171,132,630</u>  |
| <b>EXPENSES</b>                           |                       |                     |
| Salaries and employee benefits            | 88,028,876            | 89,452,888          |
| Drugs and medical supplies                | 55,517,944            | 62,630,513          |
| Purchased services                        | 2,515,651             | 2,527,620           |
| Other expenses                            | 18,297,747            | 16,521,609          |
|                                           | <u>164,360,218</u>    | <u>171,132,630</u>  |
| Excess of revenues over expenses          | 741,584               | —                   |
| Interfund transfers (Note 8)              | (2,000,000)           | —                   |
| Net increase (decrease) in fund balance   | <u>\$ (1,258,416)</u> | <u>\$ —</u>         |

|                                               | Restricted Funds    |                       |                   |                     |                    |                       |
|-----------------------------------------------|---------------------|-----------------------|-------------------|---------------------|--------------------|-----------------------|
|                                               | Capital Fund        |                       | Research Fund     |                     | Trust Fund         |                       |
|                                               | Actual              | Budget<br>(Note 12)   | Actual            | Budget<br>(Note 12) | Actual             | Budget<br>(Note 12)   |
| <b>REVENUES</b>                               |                     |                       |                   |                     |                    |                       |
| Ministry of Health                            | \$ 4,315,000        | \$ 515,000            | \$ —              | \$ —                | \$ —               | \$ —                  |
| Donations and bequests                        | —                   | —                     | —                 | —                   | 2,433,999          | 1,306,917             |
| Investment income                             | 74,602              | 70,000                | 4,361             | 5,000               | 56,537             | 81,000                |
| Other revenues                                | —                   | —                     | —                 | —                   | —                  | —                     |
|                                               | <u>4,389,602</u>    | <u>585,000</u>        | <u>4,361</u>      | <u>5,000</u>        | <u>2,490,536</u>   | <u>1,387,917</u>      |
| <b>EXPENSES</b>                               |                     |                       |                   |                     |                    |                       |
| Salaries and employee benefits                | —                   | —                     | —                 | —                   | 305,002            | 461,321               |
| Other expenses                                | —                   | —                     | —                 | —                   | 675,098            | 1,194,769             |
| Research grants (Schedule 4)                  | —                   | —                     | 533,820           | 526,904             | —                  | —                     |
| Depreciation                                  | 4,542,267           | 4,500,000             | —                 | —                   | —                  | —                     |
| Loss on disposal of capital assets            | 67,412              | —                     | —                 | —                   | —                  | —                     |
|                                               | <u>4,609,679</u>    | <u>4,500,000</u>      | <u>533,820</u>    | <u>526,904</u>      | <u>980,100</u>     | <u>1,656,090</u>      |
| (Deficiency) excess of revenues over expenses | (220,077)           | (3,915,000)           | (529,459)         | (521,904)           | 1,510,436          | (268,173)             |
| Interfund transfers (Note 8)                  | 2,578,528           | 1,408,000             | 1,030,237         | 526,904             | (1,608,765)        | (1,934,904)           |
| Net increase (decrease) in fund balances      | <u>\$ 2,358,451</u> | <u>\$ (2,507,000)</u> | <u>\$ 500,778</u> | <u>\$ 5,000</u>     | <u>\$ (98,329)</u> | <u>\$ (2,203,077)</u> |

**SASKATCHEWAN CANCER AGENCY  
CONSOLIDATED SCHEDULES OF**
**BOARD MEMBER REMUNERATION  
For the Year Ended March 31, 2017**

| Board Members                      | 2017     |           |                      |                                |                | 2016                 |           |
|------------------------------------|----------|-----------|----------------------|--------------------------------|----------------|----------------------|-----------|
|                                    | Retainer | Per Diem  | Travel Time Expenses | Travel and Sustenance Expenses | Other Expenses | Total <sup>(1)</sup> | Total     |
| Board Chair                        |          |           |                      |                                |                |                      |           |
| Waschuk, Ronald                    | 9,960    | 8,125     | 7,313                | 10,663                         | —              | 36,061               | 44,525    |
| Board Members:                     |          |           |                      |                                |                |                      |           |
| Crofts, Howard                     | —        | 4,875     | 475                  | 1,683                          | —              | 7,033                | 4,722     |
| Finnie, Doug                       | —        | 3,413     | 700                  | 1,629                          | —              | 5,742                | 4,438     |
| Lumberjack, Marlene <sup>(2)</sup> | —        | —         | —                    | —                              | —              | —                    | 1,006     |
| Night, Velma <sup>(2)</sup>        | —        | —         | —                    | —                              | —              | —                    | 3,283     |
| Strelasky, Dr. Walter              | —        | 2,313     | 1,862                | 4,440                          | —              | 8,615                | 6,559     |
| Ravis, Don                         | —        | 3,686     | 375                  | 1,283                          | —              | 5,344                | 4,359     |
| Ahmed, Zeba                        | —        | 1,913     | 100                  | 457                            | —              | 2,470                | 7,251     |
| Chabot, Lionel                     | —        | 2,725     | 1,200                | 3,450                          | —              | 7,375                | 1,247     |
| Stang, Frances <sup>(2)</sup>      | —        | 2,200     | 1,200                | 3,182                          | —              | 6,582                | —         |
| Total                              | \$ 9,960 | \$ 29,250 | \$ 13,225            | \$ 26,787                      | \$ —           | \$ 79,222            | \$ 77,390 |

(1) Board Member remuneration will fluctuate from member to member based on the number of meetings and conferences that they attend. The level of remuneration per member will also be affected by the location of these events, as members are resident in various areas throughout the province.

(2) Board Member appointed effective February 24, 2016.

(3) Board Member resigned effective February 7, 2016.

**SENIOR MANAGEMENT REMUNERATION, BENEFITS AND ALLOWANCES  
For the Year Ended March 31, 2017**

| Senior Employees                                                                               | 2017                    |                                        |              | 2016         |
|------------------------------------------------------------------------------------------------|-------------------------|----------------------------------------|--------------|--------------|
|                                                                                                | Salaries <sup>(1)</sup> | Benefits and Allowances <sup>(2)</sup> | Total        | Total        |
| Scott Livingstone, Chief Executive Officer                                                     | \$ 274,166              | \$ 8,393                               | \$ 282,559   | \$ 278,032   |
| Dr. Monica Behl, Senior Medical Officer                                                        | 512,861                 | —                                      | 512,861      | 500,344      |
| Susan Bazylewski, Vice-President, Care Services <sup>(3)</sup>                                 | —                       | —                                      | —            | 110,881      |
| Corey Miller, Vice-President, Care Services <sup>(3)</sup>                                     | 219,608                 | —                                      | 219,608      | 73,670       |
| Dr. Jon Tonita, Vice-President, Population Health, Quality and Research                        | 202,743                 | 810                                    | 203,553      | 194,446      |
| Michele Arscott, Chief Financial Officer and Vice-President, Corporate Services <sup>(4)</sup> | —                       | —                                      | —            | 55,373       |
| Lauren Donnelly, Vice-President, Corporate Services <sup>(4)</sup>                             | 201,634                 | —                                      | 201,634      | 37,609       |
| Total                                                                                          | \$ 1,411,012            | \$ 9,203                               | \$ 1,420,215 | \$ 1,250,355 |

(1) Salaries include regular base pay, overtime, honoraria, sick leave, vacation leave, merit or performance pay, lumpsum payments and any other direct cash remuneration. The pay for performance plan has been suspended for the 2014-15, 2015-16 and 2016-17 fiscal years. Senior employees received 100% of their base salary for those years. Refer to note 13 for further details.

(2) Benefits and allowances include the employer's share of amounts paid for the employees' benefits and allowances that are taxable to the employee. This includes taxable professional development, education for personal interest, non-accountable relocation benefits, personal use of an automobile, cell phone, computer, etc., as well as any other taxable benefits.

(3) Susan Bazylewski retired October 1, 2015 and Corey Miller became the Vice-President, Care Services on November 30, 2015.

(4) Michele Arscott left the Agency June 30, 2015. Lauren Donnelly became the Vice-President, Corporate Services January 12, 2016. The Chief Financial Officer role now reports to this position and not directly to the CEO so it is not included on this schedule.

# Payee Disclosure List

For the year ended March 31, 2017

## Personal Services

Listed are individuals who received payments for salaries, wages, honorariums, etc., which total \$50,000 or more.

|                     |           |                        |           |
|---------------------|-----------|------------------------|-----------|
| Jenelle Abbs-West   | \$ 92,024 | Carina Bodnar          | \$ 60,780 |
| Krista Adams        | 91,054    | Timothy Bodnarchuk     | 84,006    |
| Nazir Ahmad         | 243,132   | Deborah Boehm          | 68,325    |
| Raheel Ahmed        | 62,937    | Darryl Boehm           | 121,903   |
| Shahid Ahmed        | 439,061   | Rachel Bolt            | 53,823    |
| Marcie Aird         | 115,923   | Keith Bonham           | 152,441   |
| Linda Albinet       | 75,546    | Gabriel Bonnell        | 67,923    |
| Melody Albus        | 50,317    | Brennan Bosch          | 91,116    |
| Andrew Alexander    | 138,646   | Kelsie Boszak          | 56,958    |
| Magdi Ali           | 291,384   | Theresa Bradel         | 204,992   |
| S Kaiser Ali        | 479,128   | Nicole Braun           | 86,192    |
| Joanne Allen        | 90,429    | Ron Brecht             | 104,126   |
| Karen Almasi        | 86,459    | Marlene Brenzil        | 54,454    |
| Sara Alton          | 68,936    | Sheri Briggs           | 102,056   |
| Riaz Alvi           | 123,446   | Aleksandra Britton     | 71,705    |
| Deborah Anderson    | 181,211   | Rhonda Brockman        | 79,684    |
| J. Joe Andreas      | 93,551    | Chandra Broley         | 56,342    |
| Kaitlin Arnold      | 51,892    | Kelsey Brose           | 450,688   |
| Sheila Ash          | 63,750    | Kara Browne            | 68,057    |
| Tehmina Asif        | 375,631   | Bryan Brunet           | 441,104   |
| Rebecca Aspen       | 111,828   | Denise Budz            | 138,773   |
| Erica Auditor       | 52,539    | Sharlene Bukurak       | 78,477    |
| Patricia Babi       | 52,435    | Deborah Bulych         | 138,773   |
| Richelle Bailey     | 59,622    | Ada Bunko              | 88,203    |
| Julie-Ann Baisley   | 90,570    | Christine Burke        | 51,117    |
| Sara Baker          | 79,855    | Lorna Campbell         | 90,772    |
| Tammy Barilla       | 58,542    | Karen Carmichael       | 52,689    |
| Stacy Barlow        | 50,255    | Jamie Carroll          | 84,655    |
| Christopher Bamardo | 87,128    | Corrine Casavant       | 58,060    |
| Kimberly Basey      | 51,656    | Heather Cattet         | 92,179    |
| Sharon Beaman       | 86,368    | Alison Caza            | 56,959    |
| Cindy Beaule        | 51,834    | Haji Chalchal          | 452,263   |
| Craig Beckett       | 194,663   | Ayesha Chandna         | 189,467   |
| Monica Behl         | 512,861   | Susan Cherland         | 53,846    |
| Kim Belhumeur       | 77,771    | Heather Choquette      | 106,392   |
| Renee Belitski      | 138,511   | Kendra Christenson     | 83,906    |
| Janice Belous       | 88,582    | Kimberly Clayton       | 92,300    |
| Sandra Bernauer     | 86,626    | Scott Cole             | 84,481    |
| Wayne Berzolla      | 94,565    | Dena Colleaux          | 90,927    |
| Debashish Bhowmik   | 53,042    | Sheldon Conklin        | 64,161    |
| Carol Bichon        | 64,862    | Darcy Cook             | 85,919    |
| Tara Bilash         | 81,173    | Denise Corbin          | 69,367    |
| Julia Billett       | 77,926    | Sheila Coulter         | 103,899   |
| Stanley Bishop      | 66,770    | Sara Rose Cousins      | 79,100    |
| Denise Bitz         | 51,063    | Sarah Cowan            | 86,705    |
| Megan Black         | 89,633    | Gavin Cranmer-Sargison | 184,222   |
| Maitland Blackwell  | 93,349    | Robin Crerar Koshuba   | 77,840    |
| Courtney Blazeiko   | 74,177    | Cody Crewson           | 79,848    |
| Jonathan Blazeiko   | 86,972    | Justine Crittenden     | 86,531    |

# Payee Disclosure List

|                       |           |                         |           |
|-----------------------|-----------|-------------------------|-----------|
| Deborah Cross         | \$ 63,489 | Wanda Fiessel           | \$ 94,150 |
| Jolene Crump          | 74,872    | Monica Filipchuk        | 79,264    |
| Christine Dacey Dudey | 60,583    | Kelli Finlay            | 66,015    |
| Suzanne Dallorto      | 96,162    | Jennifer Fisher         | 79,779    |
| Patricia Danyluk      | 109,854   | Karyn Fleck             | 79,862    |
| Laci Davies           | 68,924    | Jackie Florizone        | 66,156    |
| Martie Davies         | 80,810    | Barbara Flowers         | 108,169   |
| Karen Davis           | 102,849   | Lacey Fondrick          | 50,940    |
| Jennifer Dawes        | 103,307   | Chelsey Fontaine        | 110,461   |
| Lana Dean             | 102,409   | Christel Foord          | 63,745    |
| Mary Deane            | 86,127    | Bertha Foote            | 87,933    |
| Kathryn Decker        | 51,408    | Dorothy Forreiter       | 88,832    |
| Allison Decker        | 60,441    | Linda Fortowsky         | 77,984    |
| Peng Deng             | 86,946    | Kimberly Foster         | 71,071    |
| Peter Derrick         | 91,048    | Jenna Foster            | 83,848    |
| Dayna Desautels       | 77,018    | Jenna Foulds            | 79,290    |
| Michelle Deschamps    | 111,051   | Karlee Fourlas          | 50,237    |
| Tim Deters            | 94,724    | Pauline Fox             | 89,594    |
| Carmen Dewald         | 59,779    | Leslie Francis          | 50,538    |
| Greg Dionne           | 86,051    | Tracy Frank             | 90,365    |
| Carla Dishko          | 51,259    | Laurie Galloway         | 95,443    |
| Leanne Dockray        | 71,806    | Donald Gardiner         | 457,732   |
| Heather Doell         | 61,429    | Kevin Garratt           | 105,538   |
| Wojciech Dolata       | 450,063   | Helen Gartner           | 87,960    |
| Courtney Dolha        | 69,135    | Barbara Gawley          | 64,276    |
| Lauren Donnelly       | 201,634   | Shawn Geisler           | 55,990    |
| Laura Drever          | 146,023   | Khloe George            | 50,610    |
| Dana Duchscher        | 90,816    | Janet George            | 87,586    |
| Deborah Dunbar        | 51,520    | Laurie Gerber           | 77,933    |
| Lynn Dwernychuk       | 110,345   | Brenda Gerein           | 60,767    |
| Theresa Dyczkowski    | 85,400    | Amanda Gervais          | 61,519    |
| Laurie Edmunds        | 78,640    | Kathy Gesy              | 162,114   |
| Trent Edwards         | 93,244    | Nicole Gibney           | 51,725    |
| Karen Elthimiou       | 106,157   | Lisa Glass              | 131,154   |
| Shaylin Eger          | 70,836    | Shannon Glenister       | 86,881    |
| Ali El-Gayed          | 457,408   | Frances Glover          | 64,565    |
| Christina Eling       | 53,080    | Tracy Golds             | 51,202    |
| Naglaa El-Sayed       | 200,793   | Carlene Good            | 86,356    |
| Assem El-Sayed        | 335,020   | Sandra Goodman-Chartier | 80,725    |
| Mohamed Emara         | 280,351   | Genny Goodyear          | 55,319    |
| Azure English         | 103,872   | Hadi Goubran-Messiha    | 450,902   |
| Adaobi Enyioma        | 88,721    | Margot Gough            | 64,547    |
| Heather Erickson      | 90,431    | Denise Gray-Lozinski    | 70,511    |
| Eina Esmail           | 88,914    | Terry Greene            | 79,450    |
| Carly Falkenstein     | 65,703    | Chelsea Greenwald       | 58,289    |
| Xiao Yan Fan          | 52,108    | Sasa Grubor             | 87,900    |
| Delee Farrow          | 79,532    | Courtney Hackywicz      | 66,389    |
| Merle Farthing        | 55,620    | Kamal-Uddin Haider      | 439,061   |
| April Fay             | 92,666    | Karen Hala              | 79,785    |
| Robyn Federko         | 86,975    | James Haney             | 137,153   |
| Kim Fehr              | 61,397    | M. Mansoor Haq          | 502,454   |
| Jillian Fensom        | 108,466   | Caroline Hart           | 194,395   |
| Michelle Ferguson     | 448,885   | James Hastings          | 88,073    |
| Sajjad Ferozdin       | 90,553    | Jo-Anne Hautz           | 91,347    |
| Keri Fiddler          | 90,406    | Bradley Havenvold       | 142,172   |
| Susan Field           | 75,418    | Brandi Hegyi            | 57,098    |

# Payee Disclosure List

|                       |           |                      |           |
|-----------------------|-----------|----------------------|-----------|
| Arlene Heinrich       | \$ 85,570 | Dana Laczko          | \$ 68,498 |
| Heather Helfrick      | 79,789    | Nicole Lamontagne    | 68,578    |
| Jaclyn Hepting        | 81,538    | Serena Landry        | 78,682    |
| Laura Herasymuik      | 51,431    | Danielle Langston    | 102,542   |
| Chandra Herle         | 68,474    | Tanya Lariviere      | 65,738    |
| Vera Hnenny           | 95,404    | Brittany Larmand     | 60,995    |
| Jenny Ho              | 58,255    | Debra Lauridsen      | 63,938    |
| Raelene Hobson        | 84,480    | Becky Laursen        | 54,189    |
| Debra Hodgins         | 104,600   | Jane Le              | 89,659    |
| Edith Holzapfel       | 93,979    | Duc Le               | 452,379   |
| Blaire Hopkins        | 54,876    | Nelson Leong         | 413,921   |
| Janelle Hordos        | 66,113    | Dawn Lewis           | 53,848    |
| Shauna Houshmand      | 90,369    | Margaret Lewis       | 138,216   |
| Amanda Hume           | 58,558    | Allen Li             | 84,655    |
| Nicole Ingenthron     | 80,126    | Derek Liu            | 68,839    |
| Mussawar Iqbal        | 452,263   | Scott Livingstone    | 282,559   |
| Mohammed Islam        | 87,084    | Kevin Lobzun         | 99,748    |
| Waleed Sabry Ismail   | 443,035   | Vanessa Lomenda      | 77,068    |
| Rose Jackson          | 65,653    | Jacqueline Longworth | 100,286   |
| Brenda Jameson        | 153,454   | Deborah Lulik        | 56,862    |
| Shalene Jan           | 86,882    | Sharon Luterbach     | 77,804    |
| Miroslav Jancewicz    | 450,063   | Ketsia Ly            | 93,024    |
| Tracie Janzen         | 80,395    | Wanda MacDonald      | 63,820    |
| Andrew Jelovic        | 85,004    | Janice MacDonald     | 66,306    |
| Norine Johnson        | 77,850    | Colin MacDonald      | 86,566    |
| Shannon Jones         | 69,182    | Kathy MacEdward      | 92,918    |
| Brenda Jones          | 102,368   | Matt Magosse         | 86,974    |
| Bryan Jorgensen       | 59,213    | Pearl Mah Vuong      | 58,913    |
| Alison Judd           | 80,526    | Clifford Mahlum      | 74,199    |
| Susan Kaban           | 64,072    | Shazia Mahmood       | 480,772   |
| Mirit Kaldas          | 239,885   | Mary-Ellen Mann      | 53,344    |
| Doug Kaminski         | 68,903    | Kristin Marchant     | 103,779   |
| Amanda Kasper         | 57,532    | Chantel Martin       | 53,952    |
| Melodie Keffer        | 64,711    | Stacy Martin         | 67,570    |
| Carol Kennedy         | 57,352    | Alexandra Martinson  | 104,086   |
| Donna Kennedy         | 80,716    | Karen McAuley        | 89,887    |
| Annette Kerviche      | 59,465    | Colleen McBride      | 54,111    |
| Marg Kindrachuk       | 72,063    | Cheryl McDougall     | 64,424    |
| Donna Kish            | 89,460    | Christine McDougall  | 87,671    |
| Aleksander Kolosnjaji | 94,938    | Denise McEwen        | 71,437    |
| Erica Kondra          | 96,261    | Kirstin McEwen       | 60,036    |
| Kellen Koo            | 76,238    | Stephanie McGinn     | 92,255    |
| Judy Kosloski         | 70,960    | Cherith McGregor     | 79,749    |
| Rachelle Kosokowsky   | 62,047    | Letitia McKay        | 53,945    |
| Cindy Kovacs          | 91,342    | Courtney McKay       | 79,560    |
| Beverly Kowbel        | 113,985   | Jennifer McKenzie    | 93,648    |
| Serena Kozie          | 83,904    | Jessica Mclean       | 91,756    |
| Helena Krakalovich    | 82,113    | Denise McMurphy      | 52,807    |
| Carie Kreis           | 56,150    | Asif Mehmood         | 84,655    |
| Dana Kroeker          | 92,729    | Mary Mendoza         | 73,183    |
| Lana Kruger           | 97,714    | Jackie Mensch        | 99,808    |
| Vijayananda Kundapur  | 516,627   | Kelly Mentanko       | 93,955    |
| Sherry Kuyek          | 88,860    | Corey Miller         | 219,608   |
| James Lacey           | 91,227    | Laurey Milligan      | 71,370    |
| Jill Lacey            | 104,914   | Natalya Milner       | 77,421    |
| Kevin Lacey           | 179,519   | Laurel Mitchell      | 51,605    |

# Payee Disclosure List

|                     |           |                      |           |
|---------------------|-----------|----------------------|-----------|
| Jennifer Monteith   | \$ 72,142 | Maeghan Richard      | \$ 87,239 |
| Joan Morris         | 94,741    | Mardel Richards      | 94,833    |
| Abeer Musa          | 74,139    | Yvonne Ripplinger    | 67,868    |
| Lori Muz            | 92,966    | Karen Robb           | 65,400    |
| Kali Nagyl          | 56,180    | Kathy Robertson      | 90,415    |
| Gopinath Narasimhan | 97,004    | Laura Robson         | 56,060    |
| Leah Neufeld        | 94,112    | Kelsey Rosenkranz    | 70,659    |
| Lisa Newton         | 62,682    | Donald Roszell       | 113,846   |
| Kara Nicholson      | 101,456   | Nancy Russell        | 65,572    |
| Sharon Nickel       | 94,773    | Elaine Russell       | 87,643    |
| Linda Nilson        | 204,992   | Darla Russill        | 53,245    |
| Gail Nistor         | 63,733    | Susan Ryan           | 71,773    |
| Pamela Norman       | 57,098    | Amer Sami            | 446,370   |
| Carla Norman        | 67,759    | Shannon Sapieha      | 84,724    |
| Tracy Nygaard       | 58,118    | Sabuj Sarker         | 96,213    |
| Natasha Olesen      | 95,309    | Matthew Sauder       | 61,183    |
| Colleen Olson       | 109,616   | Donna Schaffel       | 51,042    |
| Darcie O'Neill      | 94,218    | Jennifer Scherman    | 103,919   |
| Ibraheem Othman     | 435,531   | Colette Schiltz      | 91,973    |
| Chantel Otitoju     | 75,902    | Dakota Schmidt       | 51,454    |
| Melody Paculan      | 51,669    | L. Marlene Schmidt   | 80,027    |
| Kristen Padbury     | 87,660    | Bruce Schmidt        | 97,363    |
| Reg Padbury         | 158,777   | Rhonda Schondelmier  | 51,472    |
| Jignesh Padia       | 93,955    | Danielle Schultz     | 50,237    |
| Amy Paiva           | 76,643    | Marcia Schulz        | 56,862    |
| Anna-Liza Palmer    | 50,559    | Irmgard Schumann     | 91,593    |
| Leah Palmer         | 99,782    | Lyndon Schwartz      | 104,296   |
| Brittany Parr       | 52,490    | Shauna Sebastian     | 92,715    |
| Nilesh Patel        | 96,043    | Taralyn Seich        | 80,895    |
| Janet Patterson     | 90,552    | Sheena Sellers       | 74,703    |
| Kalen Paulson       | 50,602    | Judy Shaw            | 90,016    |
| Derek Pearson       | 412,668   | Patty Shinkewski     | 73,580    |
| Julius Pekar        | 137,136   | Shavon Shull         | 50,516    |
| Devon Pelletier     | 85,494    | Jo Anne Sigurdson    | 108,753   |
| Robert Penley       | 94,498    | Jennifer Simon       | 50,040    |
| Stephanie Penna     | 77,655    | Varun Singh Thakur   | 132,098   |
| Chantal Perry       | 92,467    | John Sirdar          | 92,714    |
| Annamae Perry       | 107,232   | Joseph Siriban       | 82,341    |
| Carolyn Petersen    | 82,780    | Lynn Skelly          | 51,539    |
| Deanne Pettigrew    | 62,814    | James Smetaniuk      | 79,269    |
| Zoe Phillips        | 89,279    | Angela Smith         | 51,845    |
| Leah Phillips       | 108,930   | Laura Lee Smith      | 66,081    |
| Bonnie Piercy       | 68,138    | Amy Smith            | 66,953    |
| Joan Pierlot        | 105,738   | Jocelyne Smith       | 73,585    |
| Jaimie Piper        | 94,775    | David Sollid         | 103,572   |
| Harriette Pituley   | 106,826   | Lisa Sorsdahl        | 80,849    |
| Lenore Pollock      | 93,271    | Viravong Souriyavong | 74,465    |
| Nadine Poulton      | 59,609    | Kyle Stacey          | 63,489    |
| Katrina Power       | 50,189    | Joann Starosta       | 88,745    |
| Bernadette Procyk   | 63,724    | Elaine Stewart       | 88,428    |
| Coralee Prodaehl    | 65,950    | Christine Stinson    | 67,415    |
| Kahekashan Qureshi  | 320,698   | Stacey Stoppler      | 51,829    |
| David Ramos Moguel  | 65,920    | Kimberley Stott      | 79,962    |
| Brian Reichert      | 101,669   | Heather Strachan     | 50,996    |
| Stacey Reid         | 84,535    | Chantal Strawson     | 89,689    |
| Colyn Rempel        | 58,154    | Irene Stroshein      | 58,199    |

# Payee Disclosure List

|                      |           |                    |           |
|----------------------|-----------|--------------------|-----------|
| Karly Struck         | \$ 52,073 | Louise Werner      | \$ 92,068 |
| Heather Stuart-Panko | 109,790   | Kimberly Werschler | 66,558    |
| Renee Stuckel        | 83,125    | Lindsay Weslowski  | 56,952    |
| Vinita Sundaram      | 267,038   | Anne Westad        | 94,847    |
| Shwetank Swaroop     | 64,476    | Jennifer Whelan    | 53,737    |
| Rhonda Sweet         | 75,392    | Cheryl Whiting     | 122,166   |
| Landon Switzer       | 87,664    | Alison Whittle     | 109,569   |
| Patricia Tai         | 445,167   | Kayla Wild         | 63,656    |
| D. Arron Taylor      | 115,240   | Angela Williams    | 56,068    |
| Wendie Templeton     | 67,100    | Joanne Williams    | 86,581    |
| Raquel Tenezaca      | 55,095    | Marlo Wilson       | 59,904    |
| Lindsay Tessier      | 77,165    | Khristine Wilson   | 100,553   |
| Caroli Thain         | 104,832   | Lauren Wlodarczyk  | 88,187    |
| C. Scot Thieson      | 104,222   | Carla Woitas       | 63,404    |
| Barbara Thomas       | 59,927    | Valerie Wood       | 89,548    |
| Cheryle Thompson     | 94,765    | Nicole Woodrow     | 89,370    |
| Deanna Thue          | 82,135    | Lisa Woodside      | 53,532    |
| Colleen Thurber      | 73,710    | Tanya Woolsey      | 50,843    |
| Paula Tiefenbach     | 89,172    | Philip Wright      | 441,104   |
| Paula Tinline        | 90,438    | Peter Wyant        | 99,115    |
| Jon Tonita           | 203,553   | Jim Xiang          | 173,697   |
| Brenda Toon          | 88,745    | Sunil Yadav        | 452,947   |
| Melody Topola        | 53,138    | Heidi Yathon       | 80,405    |
| Sandra Trainberg     | 98,385    | Moftah Younis      | 175,007   |
| Molly Trecker        | 89,708    | Hanaa Youssef      | 56,263    |
| Diane Treppel        | 95,826    | Patricia Yuzik     | 104,759   |
| Dominic Turley       | 93,955    | Donna Zaba         | 91,577    |
| Tyna Turner          | 50,861    | Michelle Zahayko   | 65,949    |
| Alisha Tyacke        | 74,649    | Mirjana Zarkovic   | 453,363   |
| Cara Tymchak         | 65,743    | Paula Zatylny      | 77,208    |
| Joanne Tyndall       | 92,387    | Terry-Lynn Zerff   | 123,463   |
| Sherrill Ullrich     | 74,581    | Tong Zhu           | 95,852    |
| Barbara Usher        | 80,021    | William Ziegler    | 98,112    |
| Mohammad Uz Zaman    | 66,580    | Natasha Zimmer     | 55,484    |
| Angela Vandenameele  | 65,805    |                    |           |
| Jennifer Vandenberg  | 52,335    |                    |           |
| Lisa Vass            | 50,613    |                    |           |
| Niranjan Venugopal   | 137,360   |                    |           |
| Carissa Villeneuve   | 91,965    |                    |           |
| Kiran Virik          | 323,717   |                    |           |
| Franco Vizeacoumar   | 115,096   |                    |           |
| Steven Wacker        | 98,955    |                    |           |
| Maya Wagner          | 52,593    |                    |           |
| Alana Wall           | 93,246    |                    |           |
| James Wallace        | 93,955    |                    |           |
| Joyce Warren         | 99,767    |                    |           |
| Gladys Wasylenchuk   | 136,697   |                    |           |
| Pauline Watson       | 63,494    |                    |           |
| Tracy Watts          | 51,185    |                    |           |
| Tamara Weigel        | 53,534    |                    |           |
| Ian Weinrich         | 85,465    |                    |           |
| Linda Weir           | 137,064   |                    |           |
| Sherri Welsh         | 50,306    |                    |           |
| Cori Wenaus          | 93,114    |                    |           |
| Jeana Wendel         | 120,065   |                    |           |
| Richard Weppler      | 81,211    |                    |           |

# Payee Disclosure List

For the year ended March 31, 2017

## Supplier Payments

Listed are payees who received \$50,000 or more for the provision of goods and services, including office supplies, communications, contracts and equipment.

|                                                      |    |            |                                                                |    |            |
|------------------------------------------------------|----|------------|----------------------------------------------------------------|----|------------|
| 3iHealth                                             | \$ | 889,471    | Jazz Pharmaceuticals Canada Inc. (EUSA Pharma Inc.)            | \$ | 297,927    |
| A&D Wholesale Ltd.                                   |    | 75,939     | Jubilant Draximage Inc.                                        |    | 50,881     |
| Dr. Tahir Abbas Medical Professional Corporation     |    | 477,143    | Lawlor, Dr. B.                                                 |    | 78,025     |
| Abbvie Corporation                                   |    | 2,356,651  | LEADcoach Canada Inc.                                          |    | 220,825    |
| Adienne Pharma & Biotech                             |    | 69,450     | Dr. Kevin Ledding Medical Professional Corporation Inc.        |    | 71,250     |
| A.Ahmed Medical Professional Corporation             |    | 481,236    | Macquarie Equipment Finance Ltd.                               |    | 183,676    |
| Alberta Health Services                              |    | 227,775    | Dr. Rebecca MacKay Medical Professional Corporation            |    | 218,913    |
| Dr. A. Anjad Medical Professional Corporation        |    | 474,294    | Mallinckrodt Canada ULC                                        |    | 91,825     |
| Apotibiogix                                          |    | 1,214,791  | Marsh Canada Ltd.                                              |    | 112,440    |
| Dr. Muhammad Aslam Medical Professional Corporation  |    | 477,179    | Dr. A. Paul Masiowski Medical Professional Corporation         |    | 80,250     |
| Associated Radiologists - Saskatoon                  |    | 348,835    | McKesson Canada                                                |    | 16,159,371 |
| Baxter Corporation                                   |    | 623,703    | McKesson Distribution Partners                                 |    | 1,547,442  |
| Baxalta Inc.                                         |    | 496,352    | Melemery Medical Professional Corporation                      |    | 476,588    |
| Bayer Inc.                                           |    | 431,685    | Merck Canada Inc.                                              |    | 826,086    |
| Bedman Coulter Canada LP                             |    | 276,938    | Minister of Finance                                            |    | 267,124    |
| Biomed Recovery & Disposal                           |    | 90,663     | Minister of Finance-Central Services                           |    | 195,901    |
| Dr. Mark Bosch Medical Professional Corporation Inc. |    | 493,908    | Dr. O. Moodley Medical Professional Corporation                |    | 481,835    |
| HBI Office Plus Inc.                                 |    | 235,045    | Dr. C. Mpolu Professional Corporation                          |    | 553,629    |
| Bristol-Myers Squibb Canada                          |    | 1,901,597  | NewWest Enterprise Property Group (Sask) Inc.                  |    | 1,084,665  |
| Dr. Tanya Brown Medical Professional Corporation     |    | 394,773    | NexJ Systems                                                   |    | 54,560     |
| Canadian Blood Services                              |    | 379,799    | Novartis Pharma Canada Inc.                                    |    | 5,551,786  |
| Canadian Medical Protective Association              |    | 128,773    | Ochapowace First Nation                                        |    | 50,300     |
| Canadian Pharmaceutical Distribution Network         |    | 25,381,063 | Omega Solutions Inc.                                           |    | 87,959     |
| CancerCare Manitoba                                  |    | 83,341     | Otsuka Canada Pharmaceutique                                   |    | 62,845     |
| CDR Systems Inc.                                     |    | 55,481     | Paladin Labs Inc.                                              |    | 62,742     |
| Celgene Inc.                                         |    | 10,355,382 | Paradigm Consulting Group Inc.                                 |    | 474,936    |
| City of Saskatoon                                    |    | 62,170     | PCL Construction Management Inc.                               |    | 1,081,223  |
| College of Physicians & Surgeons of Saskatchewan     |    | 69,815     | Pharmacy Computer Services Inc.                                |    | 50,987     |
| Covidien                                             |    | 88,207     | Philips Healthcare                                             |    | 114,540    |
| Crown Enterprises Ltd.                               |    | 54,678     | Prairie North Health Region                                    |    | 98,112     |
| Cypress Health Region                                |    | 118,842    | Prairie Advertising Direct Mail Specialists                    |    | 1,559,278  |
| Derby Holdings Ltd.                                  |    | 107,318    | Prince Albert Parkland Health Region                           |    | 268,241    |
| Diners Club                                          |    | 99,646     | Print-It Centres                                               |    | 60,348     |
| Donaldson Marghil Medical Inc.                       |    | 89,921     | Provincial Health Services Authority c/o BC Cancer Agency      |    | 131,892    |
| Dorie-Anne Duck Medical Professional Corporation     |    | 278,324    | Radiology Associates of Regina                                 |    | 499,168    |
| Ebco Canada Ltd.                                     |    | 88,578     | Regina Qu'Appelle Health Region                                |    | 2,774,210  |
| eHealth Saskatchewan                                 |    | 420,783    | Richardson Duffy Holdings                                      |    | 104,702    |
| Eisai Ltd.                                           |    | 102,880    | Royal Bank Visa - Payment Centre                               |    | 188,329    |
| Elaskia Canada Inc.                                  |    | 173,423    | Dr. Evgeny Sadikov Medical Professional Corporation            |    | 479,290    |
| Essaltani Medical Professional Corporation           |    | 244,087    | Dr. Muhammad Salim Medical Professional Corporation            |    | 508,222    |
| ESTI Consulting Services                             |    | 320,099    | Sask Power                                                     |    | 53,237     |
| Ferring Inc.                                         |    | 486,740    | Saskatoon Health Region                                        |    | 4,076,202  |
| Five Hills Health Region                             |    | 74,480     | Sask Telecommunications                                        |    | 342,717    |
| Federation of Saskatchewan Indian Nations            |    | 133,830    | Schaan Healthcare Products Inc.                                |    | 271,157    |
| Genomic Health Inc.                                  |    | 283,900    | Dr. David Sheridan, Medical Services, Professional Corporation |    | 252,749    |
| GMD Distribution Inc.                                |    | 230,782    | Siemens Canada Ltd.                                            |    | 231,952    |
| Grand & Toy Office Products                          |    | 127,763    | Smiths Medical Canada Ltd.                                     |    | 61,360     |
| Great-West Life Assurance Co.                        |    | 373,988    | Solvera Solutions                                              |    | 67,600     |
| Greenlee Construction                                |    | 55,484     | Somagen Diagnostics Inc.                                       |    | 629,783    |
| Guz, Jeffrey                                         |    | 60,650     | Stantec Architecture Ltd.                                      |    | 265,519    |
| Henry Downing Architects                             |    | 161,968    | Dr. Julie Stakiw Medical Professional Corporation              |    | 484,844    |
| Hospira Healthcare Corporation                       |    | 288,579    | Stromasys S.A.                                                 |    | 67,920     |
| Inland Audio Visual                                  |    | 165,013    | Dr. Derek Suderman Medical Professional Corporation            |    | 478,483    |
| Innovative OncoSolutions Inc.                        |    | 744,166    | Sunrise Health Region                                          |    | 91,411     |
| Innomar Strategies                                   |    | 207,311    | Teva Canada Ltd.                                               |    | 81,136     |
| Inveness Consulting                                  |    | 438,338    | UltraRay Medical Products Inc.                                 |    | 55,364     |
| Dr. Nayyar Iqbal Medical Professional Corporation    |    | 513,345    | University of Saskatchewan                                     |    | 1,416,888  |

## Payee Disclosure List

|                                                         |            |
|---------------------------------------------------------|------------|
| Dr. Haresh Vachhrajani Medical Professional Corporation | \$ 508,659 |
| Varian Medical Systems                                  | 3,496,454  |
| VCM Construction Ltd.                                   | 1,441,864  |
| J Venkatesh Health Care Consulting Inc.                 | 247,968    |
| WBM Office Systems                                      | 198,535    |
| Welch Allyn Canada, Ltd.                                | 80,991     |
| West Wind Aviation Ltd Partnership                      | 86,981     |
| Dr. A. Zaidi Medical Professional Corporation           | 475,371    |

### Transfers

Listed are transfers to recipients who received \$50,000 or more.

|                                                                                                   |            |
|---------------------------------------------------------------------------------------------------|------------|
| Canadian Cancer Society - Sun Smart Saskatchewan                                                  | \$ 150,000 |
| Population Health Unit-Mamawetan Churchill River Health Region-Northern Health Initiatives        | 250,000    |
| Prairie North Health Region - COPS delivery at Battleford Union Hospital                          | 125,000    |
| Prairie North Health Region - COPS renovation                                                     | 60,000     |
| Prince Albert Parkland Health Region - Peer navigation                                            | 50,000     |
| University of Saskatchewan - Advanced Diagnostics Research Laboratory                             | 252,076    |
| University of Saskatchewan - Endoscopy                                                            | 250,000    |
| University of Saskatchewan - Saskatchewan Alliance for Youth & Community Well-being               | 250,000    |
| University of Saskatchewan - Saskatchewan Alliance for Youth & Community Well-being School Grants | 167,000    |

### Other Expenditures

Listed are payees who received \$50,000 or more for expenditures not included in the above categories.

|                                                                    |            |
|--------------------------------------------------------------------|------------|
| Public Employees Disability Income Fund - employer's share         | \$ 275,129 |
| Public Employees Pension Plan - employer's share                   | 3,786,986  |
| Receiver General for Canada:                                       |            |
| - Canada Pension Plan - employer's share                           | 1,751,136  |
| - Employment Insurance - employer's share                          | 861,668    |
| 3S Health - Core Dental Plan                                       | 484,708    |
| 3S Health - Extended Health Care Plans                             | 205,718    |
| 3S Health - In-Scope Health & Dental                               | 1,037,901  |
| Saskatchewan Healthcare Employee's Pension Plan - employer's share | 456,185    |
| Workers' Compensation Board                                        | 695,482    |

## Contact Us



The Saskatchewan Cancer Agency operates prevention and early detection programs, conducts innovative research and provides safe, patient and family-centred care at our two cancer centres. To watch a video that showcases our work, visit [www.saskcancer.ca/excellence](http://www.saskcancer.ca/excellence).

Saskatchewan Cancer Agency General Reception  
639-625-2010

Allan Blair Cancer Centre (Regina)  
306-766-2213

Regina Cancer Patient Lodge  
306-359-3166

Saskatoon Cancer Centre  
306-655-2662

Saskatoon Cancer Patient Lodge  
306-242-4852

Screening Program for Breast Cancer  
1-855-584-8228

Screening Program for Cervical Cancer  
1-800-667-0017

Screening Program for Colorectal Cancer  
1-855-292-2202

Quality of Care Coordinator (patient representative)  
1-866-577-6489 (toll-free in Canada)  
[qcc@saskcancer.ca](mailto:qcc@saskcancer.ca)

Donations  
1-844-735-5590  
[donate@saskcancer.ca](mailto:donate@saskcancer.ca)  
[www.saskcancer.ca/donate](http://www.saskcancer.ca/donate)

Visit our website  
[www.saskcancer.ca](http://www.saskcancer.ca)

Twitter  
[@SaskCancer](https://twitter.com/SaskCancer)

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[info@saskcancer.ca](mailto:info@saskcancer.ca)



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 SaskCancer